

**Undertaking by Student (Stamp Paper Rs.200/-)**

I,.....S/o or D/o.....,  
student admitted under NRI category in P K Das Institute of Medical Sciences, Vaniyamkulam,  
Ottapalam for MBBS Course in the year 2024 (Student Number.....and Year.....)  
having permanent address at.....  
.....

do hereby solemnly affirm the following:-

1. I hereby bind myself and undertake to remit the Corpus Fund amount of Rs. 5 lakhs (Rupees Five Lakhs) with interest per year as and when directed by Judgments/Orders issued by the Hon'ble Supreme Court / Hon'ble High Court /Admission and Fee Regulatory Committee for Medical Education in Kerala State/Government of Kerala. I am bound to pay the amount of Corpus fund Rs. 5,00,000/- + interest per year i.e., Rs. 25,00,000 + interest (Rs.5,00,000 + interest multiplied by 5 years) to the College, within the prescribed period without fail on receipt of relevant intimation.
2. I am obliged and am bound to pay the amount of tuition Fees for each academic year within 10 days from the commencement of the due date as notified. I hereby undertake that I will abide by the terms and conditions of my admission as laid down by the Commissioner for Entrance Examinations/Government of Kerala/Kerala University of Health Sciences and the Rules and Regulations of the Medical College.
3. If I fail to perform any of the act under this Undertaking, I am bound to face the legal consequences arising thereof including discontinuance of the course.

Name of Student:

Name of Parent/ Guardian:

Signature of Student:

Signature of Parent:

Address:

Address:

Witness;

1.

2.

Course of Admission:

Date:.....