



**KALOJI NARAYANA RAO  
UNIVERSITY OF HEALTH SCIENCES,  
TELANGANA, WARANGAL-506002**

**SINGARENI  
INSTITUTE OF  
MEDICAL  
SCIENCES/GOVERNMENT  
MEDICAL  
COLLEGE,  
RAMAGUNDAM**

**Photo of the Candidate**

**DETAILS OF THE CANDIDATE ADMITTED INTO UG (MBBS) COURSE FOR THE  
ACADEMIC YEAR 2024-25**

**S.No.:**

**NEET Rank:**

**NEET Roll NO:**

**KNRUHS Merit:**

**Student Name (Block Letters):**

**Father's Name:**

**Gender:**

**Address:**

**Category/Caste:**

**Local/non-local:**

**DOB (DD/MM/YYYY):**

**Qualifying Examination Board:**

**Allotted Quota (AIQ, CQ, MQ):**

**Allotted Details as per  
KNRUHS Allotment Letter:(Please Refer to the Allotment letter issued by KNRUHS)**

**Site/College Code:039**

**Mobile Number (10 Digits Only):**

**Email ID:**

**Aadhaar Number:**

**Total Marks Obtained in Eligibility Exam:**

**Maximum Marks in Eligibility Exam:720**

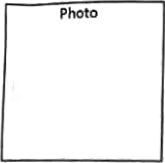
**Identification Marks (As per  
SSC/Birth Certificate)**

**1)**

**2)**

**Signature of the Candidate**

**Signature of the Principal along with the Official Seal**



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- 3 PHOTOS
- 1 COPY OF INTERMEDIATE
- 1 Rank Card

Registration No:  
To be allotted by KNR UHS

## KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES: T.S.: WARANGAL

### FORM OF APPLICATION FOR REGISTRATION

(To be sent to the University through the Principal within a month from the date of admission)  
(Please carefully read the instructions overleaf before filling the application form)

1. Course : \_\_\_\_\_ Year of Admission: 

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2. College: Singareni Institute of Medical Sciences/Government Medical College, Ramagundam

3. Name of the Candidate


(In Block letters as in the Certificate of qualifying Exam) \* Intermediate Certificate.

Student Mobile No:

4. Name of Father/Husband:

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Permanent Address :

Parent Mobile No:

House No.	
Street	
Village/Town/City	
Mandal/District	
Pin Code;	
Tele.No.(with STD Code)	

5. Date of Birth as in SSC or equivalent certificate :

Date	Month	year

6. a) Category :

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Caste:

Religion:

Sub Caste:

Nationality:

b) Special Category under which:

NCC	Sports & Games	P.H.C.	C.A.P.	N.A.
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admitted (mark tick in appropriate column) ....

7. Neet Marks:

Rank:

Hall Ticket No:

Intermediate Marks

SIGNATURE OF THE PRINCIPAL  
CANDIDATE  
WITH COLLGE SEAL

SIGNATURE OF THE

To be filled in by University:

Registration No.

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