

ANNEXURE-I

NRI CERTIFICATE OF THE CANDIDATE / PARENTS

(Format for Certificate from Embassy in the Letter Head)

No.

Date:

This is to certify that Mr. /Ms....., holder of Indian Passport
No.....dated.....issued at..... (Place of
issue) is residing in (Name of the Country) since
....., he / she is a Non-Resident Indian.

(Signature, Designation & Seal of the issuing authority)

ANNEXURE-II

NRI / OCI / PIO CERTIFICATE OF THE SPONSORER

(Format for Certificate from Embassy in the Letter Head)

No.

Date:

This is to certify that Mr./Ms.(Sponsorer's
Name) holder of Indian Passport / Citizenship No.....dated
.....issued at(Place of issue) is residing in
(Name of the country) since....., he/she is a Non-Resident Indian.

(Signature, Designation & Seal of the issuing authority)

ANNEXURE-III

EMPLOYER'S CERTIFICATE

(In the Letter Head of the Company / Organization)

No.

Date:

This is to certify that Mr. / Ms. (Parent / Sponsorer's name), holder of Indian Passport / Citizenship No..... dated.....issued at (Place of issue) is an employee of this Company / Organization since (Date of joining) in the position of (Designation) and drawing a monthly salary of.....

(Signature, Designation & Seal of the issuing authority)

ANNEXURE -IV

DECLARATION BY THE CANDIDATE

I, _____, hereby declare that all the particulars stated in this application and enclosures are true to the best of my knowledge and belief. I have read the Prospectus / guidelines and I shall abide by the terms and conditions therein. I am aware that my admission will be provisional and in the event of me being found ineligible at the time of reporting, my admission shall be denied and if I am already admitted, my admission shall be cancelled. I am also aware that in all matters concerning admission, the decision of the Karnataka Veterinary, Animal and Fisheries Science University, Bidar is final and I shall abide by it.

Place :

Signature of the Candidate

Date :

Name:

DECLARATION BY THE PARENT/ GUARDIAN

I, _____, hereby declare that all facts given in the application by the candidate, (Name) who is my son/ daughter/ ward are true and correct. In case, any particulars furnished in the application are found incorrect at a later stage, I agree to forfeit the admission of my son/daughter/blood relative, no matter, at whatever stage of the course the candidate is at that time. I hereby give an undertaking to pay regularly all his/her dues to the University/Hostel till the completion of his/her course of study. I also undertake the responsibility for his/her good conduct. I am also aware that in all matters concerning admission of my son/daughter/blood relative, the decision of the Karnataka Veterinary, Animal and Fisheries Science University, Bidar is final and I shall abide by it.

Place :

Signature of the Parent/Guardian

Date:

Name:

NOTARY AFFIDAVIT OF THE UNDERTAKING BY SPONSORER
(On 100 Rupees STAMP PAPER)

Sponsorship letter for admission (B.V.Sc. & A.H., B.Tech (D.Tech) and B.F.Sc.):

To:

The Registrar
KVAFSU
BIDAR
Pin-585 226.

Sir,

Subject: Sponsorship of (Name of the Candidate) applying for
admission in through NRI-S quota at KVAFSU, Bidar.

Ref: Your Notification No.dated.....

I, Son/Daughter of Mr./Mrs.
aged aboutyears, do hereby declare that I am a Non-Resident Indian (NRI) and I am
herewith enclosing the certified photocopy of my valid passport. That my present address
is:.....

.....

.....

Phone No.:..... Country:.....

Email:.....

That I have taken Mr. /Ms.....

Daughter/Son of.....

Address.....

.....

.....

as my ward and that I am willing to sponsor him/her as a candidate in the NRI Sponsored category for
admission to to B.V.Sc. & A.H. / B.Tech (D.Tech) / B.F.Sc. at KVAFSU, Bidar. I shall pay the
prescribed fee in dollars / rupees at the time of admission to the course and on regular basis till the
candidate completes his / her course, from time to time, otherwise candidate's admission may be
cancelled.

I assure that all the prescribed fee and expenses towards tuition fee, boarding, lodging, books and
Journals, Medical, travelling and all associated costs will be borne by me till the completion of the
course.

I assure that my relationship with the candidate is:, which comes under blood relation or do not come under blood relation (strike off whichever is not applicable) and that I undertake to bear the entire expenditure of Mr./Ms..... study in the KVAFSU, Bidar, till he/she successfully completes the course.

I request you to kindly accept my sponsorship letter and grant admission to (Name of the candidate) for (degree programme) at your university.

I will not claim the refund of Institutional Economic Fee and other fee paid to University, if my candidate cancels the admission.

Declared on this day of2020.

Signature of the Deponent

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and belief and no part of this affidavit is false and nothing has been concealed or misstated therein.

Verified at (Place) on this the (day) of (month) , (year) .

Signature of the Deponent

Name:

Solemnly affirmed and signed in my presence on this day of2020.

Place: Date:

NOTARY PUBLIC

Place:

Date:

Signature of the Sponsorship
(Name and address)

MEDICAL CERTIFICATE

Certified that I, Dr.(Reg.No.....) have this Day of2022 examined the candidate whose particulars are given below:

1. Name of the candidate :
2. Name of the parent/ guardian :
3. Sex : ☐ Male ☐ Female ☐ Transgender
Date Month Year
4. Date of Birth :
Age (in years) :
5. Identification Marks :1.
2.
6. Whether the candidate fulfills the: Normal If no, specify the defect following standards?
 - a) General Fitness consists of

Complete Blood Test including HIV Test	Yes/No
Complete Urine Test	Yes/No
Chest X-ray	Yes/No
ECG	Yes/No
Mental Retardness Test and	Yes/No
Other General Tests	
 - b) Vision Yes/No
 - c) Auditory functions Yes/No
 - d) Speech functions Yes/No

7. Whether Differently disabled (Physically Handicapped) :Yes/No (If **Yes** specify the defect and the extent of disability)

- (i) Vision
- (ii) Speech
- (iii) Hearing
- (iv) Limbs (**Upper limbs must be normal. More than 70% of disability in lower is not eligible**)

8. OPINION: with the above clinical details Please specify, Whether the candidate is Physically eligible to be considered for admission in Karnataka Veterinary Animal and Fisheries Sciences University, Bidar (if **No** specify the reasons)

Yes/No

Signature of the Candidate

Place :

Date :

Signature of Regd. Medical Practitioner

Register No.:

Full Address: