



Dr NTR UNIVERSITY OF HEALTH SCIENCES, A.P., VIJAYAWADA – 520 008.

No.899/EA2/PG/2024

Date: 12-12-2024.

## Notification on Free Exit

### Phase-1 PG Seats under Competent Authority Quota (Service & Non-Service) and Management Quota for the Academic Year 2024-25

As part of the University Counselling process for admission to PG (Medical) courses under Competent Authority Quota and Management Quota for the academic year 2024-25, the following guidelines regarding the **Free Exit** facility are hereby notified:

#### 1. Free Exit Provision

- Candidates allotted PG seats through State Counselling (both Competent Authority Quota and Management Quota) in Phase-1 can avail of the **Free Exit** option to join AIQ Round-2 counselling.
- The resignation facility for availing this option will be available:
  - **From:** 10:00 AM on 13.12.2024 (Friday)
  - **Until:** 03:00 PM on 14.12.2024 (Saturday)

#### 2. Procedure for Free Exit

- Candidates must visit their allotted college to resign from the Phase-1 seat and submit an undertaking to this effect as **per the format annexed to this notification.**
- College Principals are responsible for ensuring that all resignations are promptly entered into the college login system.
- Additionally, the college Principals must freeze the data by 04:00 PM on 14.12.2024 in their logins, download and email a signed copy of the reported/not-reported and resigned candidates to [appgadmissions2021@gmail.com](mailto:appgadmissions2021@gmail.com).
- College Principal shall return all the Original Certificates and the tuition fee and other fee collected to the candidates' who resign from their seat.
- Failure to complete this process will render the resignation as '**Null & Void**'.

#### 3. Important Guidelines for Candidates

- Utilize the **Free Exit** facility strictly within the stipulated time.
- Once the **Free Exit** option is availed, the vacated seat will no longer be claimable by the candidate and will not be available for selection in Phase-II counselling.
- Resigned candidates are eligible to participate in Phase-II Counselling as per eligibility.
- Vacancies resulting from **Free Exit** will be included in the Phase-II counselling process.

#### 4. Restrictions and Penalties

- **No Extensions:** Requests for extending the **Free Exit** deadline will not be entertained under any circumstances.
- **Dual Reporting Prohibited:** Candidates are strictly prohibited from reporting both in AIQ and State Quota.
- Any instances of dual reporting will attract severe penalties, including potential disqualification.

Candidates are encouraged to carefully follow the above instructions to ensure a smooth process.

Sd/-  
REGISTRAR

# UNDERTAKING FORM

(To be submitted by candidates resigning from Phase-1 PG Seat Allotment)

To,  
The Principal  
[Name of the College]

Date: \_\_\_\_\_

\_\_\_\_\_  
[Address of the College]

**Sub:** Undertaking for Resignation from Phase-1 PG Seat Allotment-Reg.

**Respected Sir/Madam,**

I, [Full Name of the Candidate], son/daughter of [Parent/Guardian's Name], bearing NEET PG Roll Number [Roll Number], NEET PG Rank [Rank] hereby submit my resignation from the Phase-1 PG seat allotted to me under Competent Authority Quota / Management Quota in the Specialty [Name of the Specialty] at [Name of the College], [Allotment details].

I am availing the Free Exit option as per the guidelines issued by the Competent Authority to participate in AIQ Round-2 counselling. I understand and agree to the following:

1. My resignation from the allotted seat in Phase-1 is final and irrevocable.
2. I am aware that I have no claim on the vacated seat, and it will not be available for selection in Phase-II counselling.
3. I have complied with all formalities as per the college's requirements, including the submission of this undertaking.
4. Any failure to complete the resignation process within the stipulated time will render my resignation invalid.

**Personal Details:**

- **Name:** \_\_\_\_\_
- **Registration ID:** PG24 \_\_\_\_\_
- **NEET PG Roll Number:** \_\_\_\_\_
- **Allotted College:** \_\_\_\_\_
- **Specialty Allotted:** \_\_\_\_\_
- **Contact Number:** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_

I declare that the information provided above is true to the best of my knowledge and that I have understood and agreed to abide by the terms and conditions of the Free Exit option.

**Signature of the Candidate:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**For Official Use by the College:**

- **Resignation Accepted By (Name and Designation):** \_\_\_\_\_
- **Date of Acceptance:** \_\_\_\_\_
- **Remarks (if any):** \_\_\_\_\_

**Seal and Signature of the Principal/Authorized Officer**