



Dr.N.T.R. UNIVERSITY OF HEALTH SCIENCES: A.P.: VIJAYAWADA-08

NOTIFICATION for NEW REGISTRATIONS

ADMISSIONS INTO MBBS & BDS COURSES FOR THE ACADEMIC YEAR 2026-27 UNDER

- 1) Competent Authority (**SELF-FINANCING**) seats and Competent Authority (**NRI Category**) seats in new Government Medical Colleges permitted from the academic year 2023-24 onwards;
- 2) MANAGEMENT QUOTA [Category-B1, B2 and Category-C(NRI)] seats in Private Un-aided Non-Minority and Minority Medical Colleges and Dental Colleges affiliated to Dr. NTRUHS; and
- 3) NRI Category seats in **Sri Padmavathi Medical College for Women** (Under SVIMS), Tirupati.
- 4) NRI Lapsed Category

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In continuation to this office Notifications dated 01-09-2026 & 13-09-2026, it is hereby informed that the candidates who could not registered earlier for admission under the above said category seats are informed to register now with late fee and upload the relevant documents as per the schedule given below:

SCHEDULE

Availability of online application forms	From 05.00 PM on 30-09-2026 upto 12.00 Noon on 01-10-2026
	https://drntr.uhsap.in OR https://apuhs-ugadmissions.aptonline.in/MBBSMQ/Home/Home
Registration Fee	Rs.31,000/- (Rs.11,000/- Fee + Rs.20,000/- Late Fee).
For NRI eligibility and other details please refer detailed notification	https://drntr.uhsap.in/index/notification/20260913140536897.pdf
For other details refer Prospectus	https://drntr.uhsap.in/index/notification/20260902120547157.pdf

LIST OF SCANNED ORIGINAL CERTIFICATES AND DOCUMENTS REQUIRED TO UPLOAD:

Sl.No	Details of Certificate	File Type	Size of file
1.	NEET UG 2026 Rank Card. (Mandatory)	pdf	500 KB
2.	Birth Certificate (SSC Marks Memo). (Mandatory)	pdf	500 KB
3.	Qualifying Exam (10+2) Certificate (Intermediate Marks Memo OR Equivalent – Grade Certificate not Accepted) (Mandatory)	pdf	500 KB
4.	Study Certificates from 6th class to Intermediate (10+2) in respect of the local candidates of Andhra Pradesh State who are claiming Category-B2 seats.	pdf	500 KB
5.	Transfer Certificate / Migration Certificate (Intermediate)	pdf	500 KB
6.	Caste Certificate (If qualified under category)	pdf	500 KB
7.	Minority Certificate (Muslim Only) (If applicable)	pdf	500 KB
8.	<u>For NRI Category (Upload All documents scanned as a single file)</u> i) <u>Actual NRI Candidate/ Foreign Student:</u> a) Passport of the candidate issued by the Country concerned b) NRI status certificate of the financial supporter issued by embassy of respective country under their seal. (Upload if readily available, otherwise upload an affidavit signed by parent and candidate that the same shall be submitted at the college after joining) c) Equivalence certificate issued by Association of Indian Universities (AIU) in respect of Foreign Student who studied qualifying examination in other Countries i.e. Other than Indian Education System (CBSE / CISCE/ NIOS etc.) ii) OCI/ PIO Card of the respective candidate. (registered after 4-3-2021) iii) <u>Children / Blood relative of NRI</u> :- a) Declaration of the Blood Relative (MANDATORY) signed by both the candidate and NRI (Refer Annexure-I) b) Family Tree Certificate showing the relationship between candidate and NRI, issued by the Competent Authority of Revenue Department. c) Copy of NRE/NRO Bank Account Pass Book of the Financial Supporter d) Copy of Passport of NRI Financer	PDF	1 MB
9.	<u>For NRI Lapsed Category</u> Notarized Affidavit of Parental Financial Status duly signed by the Parent and Candidate (Refer Annexure-II)	PDF	1 MB
10.	Photo identity proof (Aadhar)	pdf	500 KB
11.	PwBD Certificate (If applicable) (to determine cut off score eligibility)	pdf	500 KB
12.	Candidate's Latest passport size Photo (Mandatory)	jpg OR jpeg	100 KB
13.	Specimen Signature of the Candidate (Mandatory)	jpg OR jpeg	100 KB

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IMPORTANT NOTE: **University will verify basic scanned and uploaded documents. However Principal of the concerned college is competent to verify the originals certificates for all Categories including NRI at the time of joining. If any discrepancy found, while verification of documents the admission of the candidate is deemed to be cancelled.**

HELPLINE NUMBERS:

a.	For clarifications on Regulations	8978780501,7997710168	} 10.00 AM to 6.00 PM only
b.	For Technical difficulties	9000780707	
c.	For clarifications on payment gateway	Email: ap.uhs.support@aptonline.in	

Place: Vijayawada

Date:30-09-2026

Sd/-REGISTRAR

BEWARE OF TOUTS, BROKERS OR MIDDLEMEN

Few persons may approach you saying they have known people in Dr.N.T.R.University of Health Sciences who guarantee Medical/Dental seats through unfair means during counseling or after counseling. Counseling for all Medical/Dental seats are conducted and allotted as per the existing rules and in the ambit of the State Government as per NEET UG merit score and prioritized options exercised by the candidate. Hence, candidates and parents should not trust any of such persons. Any information regarding counseling will be placed in the University official website only.

Annexure-I

DECLARATION OF BLOOD RELATIVE FOR NRI CATEGORY

(This declaration is to be given by a Student/ Parent/Blood Relative (family member) who is seeking admission under NRI category (Management quota of NRI) of Dr. NTR University of Health Sciences, A.P., Vijayawada.)

I, Mr/Ms. _____, NEET UG 2026 Roll No _____
NEET UG 2026 Rank _____, Son/daughter of Mr/Ms. _____
seeking admission into MBBS/BDS course in NRI category seats for the academic year 2026-27
into Medical/Dental Colleges situated in Andhra Pradesh in new Govt. Medical Colleges permitted
from 2023-24 /Private Non- Minority/ Minority (Medical / Dental) Colleges do hereby declare and
state as under:

I declare that I am **Son/ Daughter/ Niece/ Nephew/ Brother/ Sister** of
Mr/Ms. _____, S/o. _____,
R/o. _____

(here incorporate the complete address of NRI to whom the candidate is related).

I declare that the said family member NRI is paying my fee for my UG course and I further
declare that the above facts stated are true and correct and I am liable for any action in the event
of concealment of facts.

Hence, this declaration.

(Signature of the Candidate)

I, _____, S/o. _____
_____ here declare and confirm that the above candidate viz., Mr/Ms
_____ is related to me as _____ (mention relationship)

(Son/Daughter/Niece/Nephew/Brother/Sister) and I hereby irrevocably agree and undertake to
provide finance support to him/her by payment of entire fees and other expenses for pursuing
MBBS/BDS course under NRI Category in the Medical/Dental Colleges affiliated to Dr NTRUHS&
in SPMCW (under SVIMS).

Date:

(Signature of the NRI)
(Blood Relative)

***Documentary Proof of Citizenship**

(For Foreign and OCI Candidates)

* Scanned copy of the first and last page of the Passport wherein the Citizenship /Nationality of the Candidate, as well as the date of issue, Validity Period, place of issue, and Issuing Authority of the Passport, are clearly mentioned.

OR

* Citizenship Certificate issued by the Competent Authority in the Country of Nationality of the Candidate, wherein the Citizenship /Nationality of the Candidate, date of issue, Validity Period, place of issue, and Issuing Authority, are clearly mentioned.

OR

* Any other Document issued by a Government Authority in the Country of Nationality of the Candidate (including OCI Card issued by the MHA or concerned Indian Diplomatic Mission in case of OCT Candidate only), wherein the Citizenship /Nationality of the Candidate, date of issue, Validity Period, place of issue and Issuing Authority of the Document, are clearly mentioned.

Annexure-II
NOTARISED AFFIDAVIT

DR. N.T.R. UNIVERSITY OF HEALTH SCIENCES, A.P., VIJAYAWADA – 520 008

ADMISSIONS INTO MBBS / BDS COURSES UNDER MANAGEMENT QUOTA, 2026-27

NOTARISED AFFIDAVIT OF PARENTAL INCOME AND SOURCE OF FUNDS FOR ADMISSION
UNDER N.R.I. LAPSED SEAT CATEGORY

I, **[Parent's Full Name]**, S/o or D/o **[Grandparent's Name]**, aged **[Age]** years, residing at **[Full Residential Address]**, do hereby solemnly affirm and declare as under:

1. That I am a citizen of India and the parent/guardian of **[Student's Name]**, who has qualified NEET-UG **[2026]** with NEET Roll No. **[NEET Roll Number]** and is seeking admission to the MBBS / BDS course under the NRI Lapsed Category for the academic year 2026-27 through online counselling conducted by Dr. NTR University of Health Sciences, A.P., Vijayawada.
2. That I am fully aware of the Prospectus / Regulations for admissions into MBBS and BDS Courses under Management Quota, 2026-27 and also Fee Structure notified in the Prospectus in respect of N.R.I. Lapsed Category of the respective Medical College / Dental College notified by Dr. NTRUHS, Vijayawada.
3. That the total annual income of my family from all sources for the financial year **[2025–2026]** is Rs. **[Amount in Figures]** (Rupees **[In Words]** only).
4. That the specific sources of income/funds for our family and for financing the aforementioned medical / dental education are as follows:
 - a. **Primary Occupation / Business / Profession:**
[e.g., Proprietor of XYZ firm / Agriculture / Salaried Employee at ABC]
 - b. **Annual Income from Business/Salary:** Rs. [Amount]
 - c. **Annual Income from Agricultural / Other Sources (if any):** Rs. [Amount]
 - d. **Details of Liquid Assets/Bank Support used for funding:**
[e.g., Personal savings, family business revenue, or sanctioned educational loan details from Bank Name, if applicable]
5. That I possess the financial capacity to pay the prescribed annual tuition fee and other requisite fees for the entire duration of the MBBS course (**4.5 years**) / the BDS Course (**4 years**) at the college concerned without any default.
6. That I certify that the information regarding income and sources provided above is true and correct to the best of my knowledge and belief. No material information has been concealed.
7. That if any information, statement, or document furnished by me is proved to be false, incorrect, or misleading at any stage, the admission of my ward is liable to be cancelled, and I shall be liable for legal and penal action as per the law.

Date:

(Signature of the Parent / Guardian)

Place:

Name: (Full Name)_____

Aadhar Number:_____

Contact Number_____

Notarised by:

ANNEXURE III

PROFORMA FOR JOINT UNDERTAKING IN THE FORM OF AFFIDAVIT
(ON NON-JUDICIAL STAMP PAPERS WITH NOTARY)
(Common for all candidates to be submitted at the time to joining)

I, _____ (candidate name), S/o / D/o
_____, bearing UG NEET 2026 Roll No _____, UG
NEET 2026 Rank _____

And

I, _____ (parent/guardian name), F/o
_____, bearing UG NEET 2026 Roll No _____, UG
NEET 2026 Rank _____

Hereby give an undertaking as below, in connection with our claim with regard to certificates/documents
(including NRI documents) submitted for admission into MBBS/BDS courses for the Academic Year 2026-27
in _____ (college name), affiliated to Dr. NTR
University of Health Sciences, A.P., Vijayawada. We, hereby declare that all our certificates are genuine.

I am aware that if the submitted relevant certificate (s) is /are found to be not genuine at a later date,
my admission is liable to be cancelled and I am liable for criminal prosecution, as may be legally deemed fit.
Further, I agree that I abide by the Rules and Regulations of Dr. NTR University of Health Sciences, A.P.,
Vijayawada.

I also hereby undertake that I shall not enter into legal litigation, if the seat allotted to me is cancelled, for the
above reasons.

Signature of the Parent/Guardian

Signature of the Candidate

Aadhaar No.
Address:

Aadhar No:

Date:
Place: