

Rupees 10 Stamp duty & Notarized by the Oath Commissioner

AFFIDAVIT

I **Lalit Lal Shah** Son **Mr. Heera Lal Shah** Resident **H No-26 Chandarbani Colony Sewala Kalan, Dehradun, Uttarakhand** having been duly sworn upon my oath, on having affirmed that I will tell the truth, do hereby state, and depose as follows:

1. I **Lalit Lal Shah** am the parent of **Vikas Lal Shah** (student).
2. I am legally authorized to make educational decisions for **Vikas Lal Shah** (student).
3. On the basis of the seat allotted NEET 2021 results, my son/daughter has taken provisional admission in Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun.
4. I state that son/daughter of the Deponent has carefully read and fully understood the provisions mentioned in the Regulations-2009 regarding ragging in Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun.
5. Deponent will not withdraw his/her candidature after the last date of admission, failing which deponent agree that he/she will pay to University, Tuition fees for the entire duration of the course.
6. That the Deponent knows what ragging means and has read, understood, and signed the Anti- Ragging undertaking form.
7. That the Deponent has read and understood the Rules, Regulations & Code of Conduct for the UG & PG Students (PG JRs), JRs & SRs. I state that I have been made aware that the copy of the same is readily available on the College website for ready perusal.
8. That the Deponent has read and understood the Vehicle Policy of the Institute. I state that I have been made aware that the copy of the same is readily available on the College website for ready perusal. As per policy, I am not permitted to possess Vehicle (Car/Bike/Scooter etc).
9. That the Deponent has read and understood the Hostel policy of the College, and the same can be accessed anytime in the Principal Office. I state that the son/ daughter of the Deponent will sign a formal undertaking as per rules, at the time of Hostel allotment.
10. That the son/daughter of the Deponent **Vikas Lal Shah** have passed the NEET examination of 2021, bearing NEET roll number is **123456789** and the counseling board-2021 has allotted seats for admission in **MBBS** course at Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun.
11. That the Deponent states that after admission in Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun if it is found that my son/ daughter has taken provisional admission on the basis of fake permanent residence, caste certificate or other certificate / information, then he will be liable to be dismissed from the admission so taken. I state that Uttarakhand Government / College Administration will be free to take any action against my son / daughter and in such a situation, I or my son / daughter will not submit any claim for the refund of all the fees deposited at the time of admission.

12. That the unsatisfactory conduct and unsatisfactory academic progress, after taking admission in the college by the son/daughter of the deponent, or knowingly taking admission on the basis of forged records and otherwise being expelled from the college, then in such a situation, the entire responsibility will be of the deponent and the son/daughter. The action taken by the college administration on the son / daughter of the Deponent will be valid.
13. My permanent address for correspondence is **H No-26 Chandarbani Colony Sewala Kalan, Dehradun, Uttarakhand**
14. My registered Mobile number for contact is: **9524561253**
15. My personnel email ID is vikaslal@gmail.com which I regularly access.
16. My Aadhar card number is **1234567891011**

Deponent

Verification

Deponent **Lalit Lal Shah** above certify that aforementioned statements have been written to the best of my personal knowledge, true and complete with full confidence and nothing has been concealed. God help me

Verified Location Dehradun Uttarakhand Date **30/01/2022**

Deponent

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

Rupees 10 Stamp duty & Notarized by the Oath Commissioner

AFFIDAVIT

I **Vikas Lal Shah** Son Mr. **Ialil Lal Shah** Resident **H No-26 Chandarbani Colony Sewala Kalan, Dehradun, Uttarakhand**, having been duly sworn upon my oath, on having affirmed that I will tell the truth, do hereby state, and depose as follows:

1. That I the deponent **Vikas Lal Shah** have passed the NEET examination of 2021, My NEET roll number is **123456789** Counseling Board-2021 has allotted seats for admission in Post Graduate course at Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun in **MBBS** course.
2. On the basis of the seat allotted NEET 2021 results, I **Vikas Lal Shah** have taken provisional admission in Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun.
3. That after admission in Shri Guru Ram Rai Institute of Medical and Health Sciences, Patel Nagar, Dehradun if it is found that I have taken provisional admission on the basis of fake permanent residence, caste certificate or other certificate / information, then I will be liable to be dismissed from the admission so taken. The Uttarakhand Government / College Administration will be free to take any action against me in such a situation, I will not submit any claim for the refund of all the fees deposited at the time of admission.
4. Deponent will not withdraw his/her candidature after the last date of admission, failing which deponent agree that he/she will pay to University, Tuition fees for the entire duration of the course.
5. That the unsatisfactory conduct and unsatisfactory academic progress of the deponent after taking admission in the college, or knowingly taking admission on the basis of fake records, or otherwise being expelled from the college; in such a situation, no claim will be presented by the deponent and/or his parent / guardian, for refund of fees.
6. That the Deponent knows what ragging means and has read, understood, and signed the Anti- Ragging undertaking form.
7. That the Deponent has read and understood the Rules, Regulations & Code of Conduct for the UG & PG Students (PG JRs), JRs & SRs. I state that I have been made aware that the copy of the same is readily available on the College website for ready perusal.
8. That the Deponent has read and understood the Vehicle Policy of the Institute. I state that I have been made aware that the copy of the same is readily available on the College website for ready perusal. As per this policy, I am not permitted to possess Vehicle (Car/Bike/Scooter etc).
9. That the Deponent has read and understood the Hostel policy of the College, and the same can be accessed anytime in the Principal Office. I state that I will sign a formal undertaking as per rules, at the time of Hostel allotment.
10. My permanent address for correspondence is **H No-26 Chandarbani Colony Sewala Kalan, Dehradun, Uttarakhand**.
11. My registered Mobile number for contact is: **9524561253**
12. My personnel email ID is **vikaslal@gmail.com** which I regularly access.

13. My Aadhar card number is **1234567891011**

Deponent

verification

Deponent **Vikas Lal Shah** above certify that aforementioned statements have been written to the best of my personal knowledge, true and complete with full confidence and nothing has been concealed. God help me

Verified Location Dehradun Uttarakhand Date **30/01/2022.**

Deponent

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

SAMPLE

UNDERTAKING BY THE STUDENT

I _____ (Full Name in Block Letters) Son/ Daughter of
Mr./Mrs./Ms. _____ (Full Name in Block Letters) admitted to
the course of _____ (Name of Course) with Admission
No. _____ at **Shri Guru Ram Rai Institute of Medical & Health Sciences, Patel Nagar ,
Dehradun** affiliated to **Shri Guru Ram Rai University, Patel Nagar Dehradun, Uttarakhand**
hereby declare that I have received a copy of the National Medical Commission (Prevention and
Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021 (hereinafter referred
to as the said regulations).

2. I have carefully read and fully understood the provisions in the said regulations.

3. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have
fully understood what constitutes —ragging.

4. I have also in particular perused the provisions of Chapter IV and read and understood the
administrative and penal actions that may be taken against me in case I am found guilty of ragging
or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

5. I hereby undertake that—

(i) I will not indulge in any behaviour or act that may come under the definition of
ragging as may be constituted under regulation 3 of the said regulations;

(ii) I will not participate in or abet or propagate ragging in any form included but not
limited to those that may be constituted under regulation 3 of the said regulations;

(iii) I will not hurt anyone physically or psychologically or cause any other harm.

6. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the
provisions of the said regulations or as per the applicable laws for the time being in force.

7. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed on this the _____ day of _____ month _____ of year.

Signature

Name:

Address:

Tel/ Mobile No:

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

UNDERTAKING BY PARENT

I _____(Full Name in Block Letters) Father / Mother/
Guardian of Mr./Mrs./Ms. _____(Full Name of
Student in Block Letters) admitted to the course of _____ (Name of
Course) with Admission No. _____at **Shri Guru Ram Rai Institute of Medical &
Health Sciences, Patel Nagar, Dehradun, Uttarakhand** affiliated to **Shri Guru Ram Rai
University, Patel Nagar, Dehradun, Uttarakhand** hereby declare that I have received a copy of
the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and
Institutions) Regulations, 2021(hereinafter referred to as the said regulations).

2. I have carefully read and fully understood the provisions in the said regulations

3. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have
fully understood what constitutes —ragging.

4. I have also in particular perused the provisions of Chapter IV and read and understood the
administrative and penal actions that may be taken against my son/ daughter/ward in case he /she is
found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to
promote ragging.

5. I hereby undertake that my (son/ daughter/
ward) _____(Name)

(i) will not indulge in any behaviour or act that may come under the definition of ragging as may

be constituted under regulations 3 and 4 of the said regulations;

(ii) will not participate in or abet or propagate ragging in any form included but not limited to
those that may be constituted under regulations 3 and 4 of the said regulations;

(iii) will not hurt anyone physically or psychologically or cause any other harm. 11. I hereby
agree that if my son/ daughter/ ward is found guilty of any aspect of ragging, he/ she may be
punished as per the provisions of the said regulations or as per the applicable law for the
time being in force.

6. I also declare that he/she has never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, his/her admission is liable to be cancelled /withdrawn.

Signed on this the _____ day of _____ month of _____ year.

Signature

Name:

Address: Tel/ Mobile No.

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address: