



ADESH UNIVERSITY

(Established under Government of Punjab Act 6 of 2012)

NH-7, Barnala Road, Bathinda-151101 Punjab (India)

ENROLMENT FORM FOR ADMISSION TO MBBS/BDS COURSE

(SESSION 2017-2018)

Please fill the Form in CAPITAL LETTERS in blue/black ball point pen only

Paste Passport
size
colour photograph
same as on NEET-2017
application form

1. NEET-2017 Roll No.
2. Marks obtained in NEET-2017 Percentile
3. Category Name
4. Name of Candidate
5. Father's Name
6. Mother's Name
7. Gender Male Female
8. Date of Birth (With documentary proof) Day Month Year
9. Age as on 31.12.2017: _____ Years _____ Months _____ Day
10. Name of School/College and State from where passed 10+1 & 10+2:
 - (a) 10+1: _____ State _____
 - (b) 10+2: _____ State _____
11. (a) Marks of 10+2 in PCB Max. Marks Marks Obt. %age
(Physics, Chemistry & Biology/Biotechnology)
- (b) Marks of 10+2 in PCBE Max. Marks Marks Obt. %age
(Physics Chemistry, Biology/Biotechnology & English)
12. Subject wise Marks Obtained in 10+2

Physics		Chemistry		Biology/ Biotechnology		English	
Total Marks	Obt Marks	Total Marks	Obt Marks	Total Marks	Obt Marks	Total Marks	Obt Marks

13. Annual Income of Parents Rs. _____ (From all sources)
14. Residence Status: Punjab State Name _____ District _____
(please tick)
Other State Name _____ District _____

Signature of Candidate

15. Correspondence Address _____

_____ Pin Code _____

16. Permanent Address _____

_____ Pin Code _____

17. **Contact Details:**

Candidate Mobile No _____ Mobile No _____
e-mail _____

Father Mobile No _____ Land Line No _____
e-mail _____

Mother Mobile No _____ Land Line No _____
e-mail _____

Local Guardian Mobile No _____ Land Line No _____
e-mail _____

Guardian's relationship with the candidate _____

Permanent Address _____

Date _____

Place _____

Signature of Candidate

Undertaking

I undertake that in case of any change in above particular (s) I will inform the college authorities in writing within a week from the date of change. In case of default, I shall be liable for disciplinary action as the Institution may deem fit.

Signature of Candidate

Verification by Parent/Guardian

The above information given by my ward is true & correct and nothing has been concealed there in.

Signature of Parent/Guardian

Date _____ Name of the Parent/Guardian _____

Place _____ Guardian's relationship with the candidate _____

॥ ਅਦੇਸ਼ੁ ਤਿਸੈ ਅਦੇਸੁ ॥



ADESH UNIVERSITY

(Established under Government of Punjab Act 6 of 2012)

NH-7, Barnala Road, Bathinda-151101 Punjab (India)

REQUEST FOR HOSTEL ACCOMMODATION

At the campus of Adesh University

COURSE _____ (SESSION _____)

NAME OF COLLEGE _____

Please fill TWO COPIES of the Form in CAPITAL LETTERS

Paste Passport size colour photograph same as on NEET-2017 application form

The Principal

Campus, Adesh University
Barnala Road, Bathinda-151101.

Sir,

I have taken admission in _____ course at Adesh University. You are requested to kindly allot me hostel accommodation in the campus of ADESH UNIVERSITY, BATHINDA. My particulars are as under:-

Name																				
Mobile Number																				
e-mail																				
Father's Name																				
Mobile Number																				
Mother's Name																				
Mobile Number																				
Permanent Address																				
Parents e-mail																				
Country Code					Area STD Code															
Land Line No.																				
Local Guardian(s) Name																				
Guardian's relationship with the candidate																				
Address																				
Area STD Code					Phone No.															
Mobile																				
E-Mail:																				

Undertaking

1. I undertake that in case of any change in above particular (s) I will inform the college authorities in writing within a week from the date of change. In case of default, I shall be liable for disciplinary action as the institute may deem fit.
2. I have gone through the hostel rules. I shall abide by the hostel rules and regulations failing which I understand that disciplinary action can be taken against me including expulsion from the hostel for which I shall not claim for refund/adjustment of fee paid by me.
3. I shall not leave the hostel without getting out pass from the competent authority.

Date: _____

Signature of the Candidate

Undertaking of Parents/Guardian

I have gone through the hostel rules. I undertake that my ward shall follow the hostel rules and regulations, failing which disciplinary action can be taken including expulsion from hostel and I shall not claim for the refund/adjustment of fee paid by us.

Name of the Parent/Guardian _____

Signature: _____

Guardian's relationship with the candidate _____

For office use only:

Hostel Allotment

1. Amount of Hostel fee paid vide Receipt no _____ Dated _____

2. Hostel No _____ Block _____ Floor _____ Room No _____

3. Remarks, if any _____

Verified by:

Counter Signature of Principal

Hostel Superintendent

Hostel Warden

Re-allotment of Hostel

1. Date of Re allotment _____

2. Amount of Hostel fee paid vide Receipt No _____ Date _____

3. Hostel No _____ Block _____ Floor _____ Room No _____

4. Reason for Re-allotment _____

Verified by:

Counter Signature of Principal

Hostel Superintendent

Hostel Warden

Note:- One copy of this form to be placed in the personal record of the candidate and another filled copy of this form to be retained by the superintendent hostel in his/her office record.

To be submitted on stamp paper of Rs 100/- and Duly Attested by Notary Public

MBBS/BDS Admission-2017

*Format of undertaking to be submitted by the
Parents/Guardian of the candidates at the time of admission*

**UNDERTAKING
by Parents/Guardian**

1. I _____ son/daughter of _____ Father/Guardian of (student name) _____ declare that my ward has opted for admission in MBBS/BDS course at ADESH INSTITUTE OF MEDICAL SCIENCES & RESEARCH/ADESH INSTITUTE OF DENTAL SCIENCES & RESEARCH, Barnala Road, BATHINDA.
2. I understand that the Institute is charging a provisional tuition fee. I shall be liable to pay revised tuition fee in case the same has been revised by the competent authority.
3. I undertake to pay the balance of the tuition fee and other dues as fixed by the institution as and when demanded by the college.
4. I understand that, my ward will not be allowed to leave the course after the cutoff date of admission or before completing the full course including internship training due to any reason whatsoever, failing which I understand that I have to pay all balance fee for entire course. In support of the same I am also submitting a Bank Guarantee equal to the fee for the remaining part of the course.

Read, Understood and accepted

Signature of the Parents/Guardian

Name _____ Address _____

_____ Date _____ Place _____

Solemnly affirmed and signed in my presence on this _____ day of _____ month of
year _____, after reading the contents of this affidavit.

Notary Public

To be submitted on stamp paper of Rs 100/- and Duly Attested by Notary Public

MBBS/BDS Admission-2017
Undertaking jointly by the Candidate and Parents/Guardian

We (Name of the Candidate) _____ and (name of
Father/Mother/Guardian of candidate) _____ declare as under:-

A BY THE CANDIDATE

1. I have taken admission in MBBS/BDS Course at Adesh Institute of Medical Sciences and Research/Adesh Institute of Dental Sciences & Research, Bathinda in response to their relevant prospectus after having read and understood all the terms and conditions therein.
2. I agree to abide by the terms and conditions of the prospectus.
3. I understand that the duration of course of instruction for the degree of Bachelor of Medicine and Bachelor of Surgery (MBBS) including Compulsory Rotatory Internship, shall be five and a half years and for the degree of Bachelor of Dental Surgery (BDS) including Compulsory Rotatory Internship, shall be Five years.
4. I understand that if all the certificates submitted by me are not approved by the authorities concerned, my admission shall be cancelled.
5. I agree that my admission shall be cancelled if I am found to have submitted incorrect or incomplete information to the college authorities. I agree that in such case, fee paid shall not be refunded to me. Decision of the Principal in such a case will be final. I confirm that I have not been disqualified from any University/Board.
6. I also understand that the decision of the Admission Committee will be final and that my admission made will be subject to approval by Competent Authority.
7. I understand that the full fee paid by me on being admitted to the course is as per the prospectus for 2017 and that the fee is payable either by cash or bank demand draft in the name of " Adesh Institute of Medical Sciences and Research/Adesh Institute of Dental Sciences & Research, payable at Bathinda" against a proper receipt, and that cheques will not be accepted. I know and agree that the fee once paid is not refundable.
8. I agree to pay all the dues as notified by the college authorities from time to time and on the dates fixed for the purpose and understand that fees/dues paid once are not refundable. I agree that any outstanding dues against me, as and when I leave the college, shall be adjusted by the authorities concerned from my security deposit and the balance, if any, claimed from me.
9. If I, directly or indirectly, take part in any movement to create any kind of disturbance during the period of the aforementioned course, including compulsory rotatory internship period, in the College/ Hospital or hold or address a meeting in the College/Hospital or participate in any other activity which, in the opinion of the Principal/Medical Superintendent will undermine the College/ Hospital discipline or indulge in taking alcoholic beverages or hallucinogenic drugs; I agree that my name shall be removed from the rolls of the college. I agree that the decision of the college authorities in such matters shall be final and binding on me.
10. I understand that if I directly or indirectly, indulge in ragging in any form, I shall be liable to such punitive action as may be determined by college authorities and/or as per law for the time being in force.

11. I understand that I will be permitted to take the 1st Prof. MBBS/BDS Examination one year after my admission provided I put in the required attendance of 75% in theory and 80% in non-theory (Practical) classes along with 35% marks in Internal Assessment as per rules of the University and Medical Council of India/Dental Council of India.
12. If the college authorities find, on the basis of my attendances, results in the college examinations or my failure to take such examinations, that I am not a fit candidate to be promoted to the next higher class or to appear in a professional examination, I agree to be detained in the same class or be debarred from appearing in the university professional examinations.
13. I understand that, I shall not be allowed to leave the course after the cutoff date of admission or before completing the full course including internship training due to any reason whatsoever, failing which I understand that I have to pay all balance fee for entire course. In support of the same I am also submitting a Bank Guarantee equal to the fee for the remaining part of the course.

B. BY PARENT/GUARDIAN

14. I _____ Father/ Mother /Guardian of _____ hereby declare that I shall abide by the rules of Institution and those made by the authorities hereafter.
15. I hereby declare that I hold myself responsible for the timely payment of all the dues i.e. tuition fee, hostel dues, fines, canteen, mess and other charges etc. payable to the Institution, in respect of my son/ daughter/ ward _____ (name of the candidate) during the period of his/her studies in MBBS/BDS Course.
16. I declare that he/she has never been disqualified by any University or Board.
17. I understand that, my ward will not be allowed to leave the course after the cutoff date of admission or before completing the full course including internship training due to any reason whatsoever, failing which I understand that I have to pay all balance fee for entire course. In support of the same I am also submitting a Bank Guarantee equal to the fee for the remaining part of the course.

Signature of the Parent /Guardian

Signature of the Student

Guardian's relationship with the candidate _____

Witness: (with full name address and signature)

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| _____ | _____ |
| _____ | _____ |

Solemnly affirmed and signed in my presence on this _____ day of _____ month of year _____, after reading the contents of this affidavit.

Notary Public

**MBBS/BDS Admission-2017
BANK GUARANTEE**

1. We the _____ undertake to pay the amount equivalent to US Dollars \$ _____ /Rs _____ to Adesh institute of Medical Sciences & Research (AIMSR), Bathinda/Adesh Institute of Dental Sciences & Research (AIDSR), Bathinda without any demur, merely on demand by the Principal, AIMSR/AIDSR, Bathinda without any objection on account of balance tuition fee of Mr./Ms. _____ S/o/D/o _____ R/o _____ District _____ . The liability under this guarantee shall be restricted to an amount not exceeding USD _____ /INR _____ .
2. We are liable to pay guaranteed amount if a written claim or demand is served upon by the Principal, AIMSR/AIDSR, Bathinda.
3. The beneficiary should see confirmation of issuance of the guarantee from controlling office of issuing branch, which is situated at _____ .
4. We undertake not to revoke this guarantee during its currency except with the prior consent of the Principal, Adesh Institute of Medical Sciences and Research/Adesh Institute of Dental Sciences and Research, Bathinda.
5. Notwithstanding anything contained herein above our liability under this guarantee is restricted to Rs _____ and shall be relieved/discharged of all liabilities under this guarantee after (Date of expiry).
6. Notwithstanding herein above stated our liability under the guarantee is limited to Rs _____ (Rupees _____) and a written claim arising out of the guarantee must be lodged with the bank on or before after which the _____ (Date of expiry) liability of the bank would be extinguished.

Date:-

For

Signature.....

Note: To be signed & stamped by Bank Authorities.

To be submitted on stamp paper of Rs 100/- and Duly Attested by Notary Public

AFFIDAVIT BY THE STUDENT

- 1) I, _____ S/o D/o Mr./Mrs./Ms. _____, having been admitted in _____ course at _____ (name of the institution) Adesh University, Bathinda have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the “Regulations”) carefully read and fully understood the provisions contained in the said Regulations.
- 2) I have, in particular, perused clause 3 of the Regulations and I am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and I am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
- a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
- b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
- 6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

Name _____ Address _____

Pin Code _____

VERIFICATION

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

Verified at _____ on this _____ day of _____ month of _____ year.

Signature of deponent

Solemnly affirmed and signed in my presence on this _____ day of _____ month of, _____ year _____, after reading the contents of this affidavit.

Notary Public

To be submitted on stamp paper of Rs 100/- and Duly Attested by Notary Public

ਵਿਦਿਆਰਥੀ ਵੱਲੋਂ ਸਵੈ-ਘੋਸ਼ਨਾ ਪੱਤਰ

- 1) ਮੈਂ _____ (ਵਿਦਿਆਰਥੀ ਦਾ ਪੂਰਾ ਨਾਮ ਸਮੇਤ ਪੰਜੀਕਰਨ ਨਾਮ ਅੰਕਨ ਨੰ:) ਪੁੱਤਰ/ਪੁੱਤਰੀ ਸ੍ਰੀ/ਸ੍ਰੀਮਤੀ _____ ਆਦੇਸ਼ ਇੰਸਟੀਚਿਊਟ ਆਫ ਮੈਡੀਕਲ ਸਾਇੰਸਜ਼ ਅਤੇ ਰਿਸਰਚ / ਆਦੇਸ਼ ਇੰਸਟੀਚਿਊਟ ਆਫ ਡੈਨਟਲ ਸਾਇੰਸਜ਼ ਅਤੇ ਰਿਸਰਚ ਬਠਿੰਡਾ ਵਿੱਚ ਦਾਖਲ ਹੋਇਆ ਹਾਂ ਅਤੇ ਮੈਂ ਯੂਨੀਵਰਸਿਟੀ ਗਰਾਂਟ ਕਮੀਸ਼ਨ ਦੀ ਨਿਯਮਾਵਲੀ 2009 ਜੋ ਕਿ ਉੱਚ ਸਿੱਖਿਆ ਸੰਸਥਾਨ ਵਿੱਚ ਰੈਗਿੰਗ ਨੂੰ ਰੋਕਣ ਵਾਸਤੇ ਹੈ ਨੂੰ ਸਾਵਧਾਨੀ ਪੂਰਵਕ ਪੜ੍ਹ ਲਿਆ ਹੈ ਅਤੇ ਇਸ ਨਿਯਮਾਵਲੀ ਵਿੱਚ ਦਿੱਤੇ ਗਏ ਨਿਯਮਾਂ ਨੂੰ ਚੰਗੀ ਤਰ੍ਹਾਂ ਸਮਝ ਲਿਆ ਹੈ ।
- 2) ਮੈਂ ਨਿਯਮਾਵਲੀ ਦੇ ਨਿਯਮ 3 ਨੂੰ ਖਾਸ ਤੌਰ ਤੇ ਪੜ੍ਹ ਲਿਆ ਹੈ ਅਤੇ ਹੁਣ ਮੈਨੂੰ ਪਤਾ ਹੈ ਕਿ ਰੈਗਿੰਗ ਕੀ ਹੈ ।
- 3) ਮੈਂ ਨਿਯਮਾਵਲੀ ਦੇ ਨਿਯਮ 7 ਅਤੇ ਨਿਯਮ 9.1 ਨੂੰ ਵੀ ਚੰਗੀ ਤਰ੍ਹਾਂ ਪੜ੍ਹ ਲਿਆ ਹੈ ਅਤੇ ਮੈਨੂੰ ਇਹ ਚੰਗੀ ਤਰ੍ਹਾਂ ਪਤਾ ਹੈ ਕਿ ਅਗਰ ਮੈਂ ਰੈਗਿੰਗ ਉਤਸਾਹਿਤ ਕਰਦਾ, ਸਿੱਧੇ ਜਾਂ ਅਸਿੱਧੇ ਤੌਰ ਤੇ ਰੈਗਿੰਗ ਨੂੰ ਉਤਸਾਹਿਤ ਕਰਨ ਦੀ ਸਾਜਿਸ਼ ਵਿੱਚ ਹਿੱਸਾ ਲੈਂਦਾ ਪਾਇਆ ਗਿਆ ਤਾਂ ਮੈਂ ਸਖਤ ਅਤੇ ਅਨੁਸ਼ਾਸਨਿਕ ਕਾਰਵਾਈ ਦਾ ਜ਼ਿੰਮੇਵਾਰ ਹੋਵਾਂਗਾ ।
- 4) ਮੈਂ ਘੋਸ਼ਨਾ ਕਰਦਾ ਹਾਂ ਅਤੇ ਵਾਦਾ ਕਰਦਾ ਹਾਂ ਕਿ :
 - ਉ) ਮੈਂ ਨਿਯਮਾਵਲੀ ਦੇ ਨਿਯਮ 3 ਵਿੱਚ ਦਿੱਤੇ ਗਏ ਕਿਸੇ ਵੀ ਤਰ੍ਹਾਂ ਦੇ ਵਰਤਾਓ ਜਾਂ ਕੰਮ ਜੋ ਕਿ ਰੈਗਿੰਗ ਬਣਦੀ ਹੋਵੇ ਵਿੱਚ ਸ਼ਾਮਿਲ ਨਹੀਂ ਹੋਵਾਂਗਾ ।
 - ਅ) ਮੈਂ ਕਿਸੇ ਵੀ ਤਰ੍ਹਾਂ ਦੀ ਰੈਗਿੰਗ ਨੂੰ ਉਤਸਾਹਿਤ ਕਰਨ ਜਾਂ ਮਜ਼ਬੂਰ ਕਰਨ ਵਾਲੇ ਕਿਸੇ ਵੀ ਕੰਮ ਵਿੱਚ ਸ਼ਾਮਿਲ ਨਹੀਂ ਹੋਵਾਂਗਾ ਜੋ ਕਿ ਨਿਯਮਾਂ ਵਲੀ ਦੇ ਨਿਯਮ 3 ਤਹਿਤ ਰੈਗਿੰਗ ਬਣਦੀ ਹੋਵੇ ।
- 5) ਮੈਂ ਇਹ ਵਿਸ਼ਵਾਸ ਦਿਵਾਉਂਦਾ ਹਾਂ ਕਿ ਅਗਰ ਮੈਂ ਨਿਯਮਾਵਲੀ ਦੇ ਨਿਯਮ 9.1 ਦੇ ਮੁਤਾਬਿਕ ਰੈਗਿੰਗ ਦਾ ਦੋਸ਼ੀ ਪਾਇਆ ਜਾਂਦਾ ਹਾਂ ਤਾਂ ਮੈਂ ਫੌਜਦਾਰੀ ਕਾਨੂੰਨੀ ਕਾਰਵਾਈ ਤੋਂ ਇਲਾਵਾ ਕਿਸੇ ਵੀ ਕਾਨੂੰਨ ਤਹਿਤ ਜੋ ਕਿ ਉਸ ਸਮੇਂ ਲਾਗੂ ਹੋਵੇ ਸਜ਼ਾ ਦਾ ਹੱਕਦਾਰ ਹੋਵਾਂਗਾ ।
- 6) ਮੈਂ ਇਹ ਘੋਸ਼ਿਤ ਕਰਦਾ ਹਾਂ ਕਿ ਮੈਨੂੰ ਇਸ ਦੇਸ਼ ਦੀ ਕਿਸੇ ਵੀ ਸੰਸਥਾ ਵੱਲੋਂ ਰੈਗਿੰਗ ਨੂੰ ਉਤਸਾਹਿਤ ਕਰਨ ਜਾਂ ਰੈਗਿੰਗ ਨੂੰ ਉਤਸਾਹਿਤ ਕਰਨ ਦੀ ਸਾਜਿਸ਼ ਜਾਂ ਰੈਗਿੰਗ ਦਾ ਦੋਸ਼ੀ ਪਾਉਣ ਤੋਂ ਕੱਢਿਆ ਜਾਂ ਦਾਖਲਾ ਲੈਣ ਤੋਂ ਰੋਕਿਆ ਨਹੀਂ ਗਿਆ ਹੈ ਅਤੇ ਮੈਂ ਇਹ ਵੀ ਘੋਸ਼ਣਾ ਕਰਦਾ ਹਾਂ ਕਿ ਅਗਰ ਉਪਰ ਦਿੱਤੀ ਜਾਣਕਾਰੀ ਝੂਠੀ ਪਾਈ ਜਾਂਦੀ ਹੈ ਤਾਂ ਮੇਰਾ ਦਾਖਲਾ ਰੱਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ ।

ਬਿਆਨ ਕਰਤਾ ਦੇ ਦਸਤਖਤ

ਘੋਸ਼ਣਾ ਦੀ ਮਿਤੀ ਦਿਨ _____ ਮਹੀਨਾ _____ ਸਾਲ _____

ਤਸਦੀਕ : ਨਾਮ

ਮੈਂ ਇਹ ਤਸਦੀਕ ਕਰਦਾ ਹਾਂ ਕਿ ਘੋਸ਼ਨਾ ਪੱਤਰ ਵਿੱਚ ਦਿੱਤੇ ਗਏ ਤੱਥ ਮੇਰੀ ਜਾਣਕਾਰੀ ਮੁਤਾਬਿਕ ਸਹੀ ਵਾ ਦਰੁਸਤ ਹਨ ਅਤੇ ਇਸ ਘੋਸ਼ਨਾ ਪੱਤਰ ਦਾ ਕੋਈ ਵੀ ਹਿੱਸਾ ਗਲਤ ਨਹੀਂ ਹੈ ਅਤੇ ਨਾ ਹੀ ਕੋਈ ਗੱਲ ਲੁਕਾਈ ਜਾਂ ਛੁਪਾਈ ਹੈ ।

ਬਿਆਨ ਕਰਤਾ ਦੇ ਦਸਤਖਤ

ਤਸਦੀਕ ਕਰਨ ਦਾ ਸਥਾਨ _____

ਮਿਤੀ : ਦਿਨ _____ ਮਹੀਨਾ _____ ਸਾਲ _____

ਮੇਰੀ ਹਾਜ਼ਰੀ ਵਿੱਚ ਘੋਸ਼ਨਾ ਪੱਤਰ ਦੇ ਤੱਥ ਪੜ੍ਹਨ ਤੋਂ ਬਾਦ ਸਹੁੰ ਚੁੱਕ ਕੇ ਮਿਤੀ : ਦਿਨ _____ ਮਹੀਨਾ _____ ਸਾਲ _____ ਨੂੰ ਦਸਤਖਤ ਕੀਤੇ ਗਏ ।

Notary Public

To be submitted on stamp paper of Rs 100/- and Duly Attested by Notary Public

विद्यार्थी द्वारा घोषणा

- 1) मैं..... (विद्यार्थी का नाम) सुपुत्र/सुपुत्री
श्री/श्रीमति
आदेश युनिवर्सिटी बटिण्डा में (संस्था का नाम)
में (कोर्स का नाम) में पढ़
रहा/रही हूँ और मैंने युनिवर्सिटी ग्रांट कमीशन द्वारा जारी नियमावली-2009 जो कि उच्च शिक्षण संस्थानों में रैगिंग रोकने के लिए है, को
ध्यानपूर्वक पढ़ लिया है और नियमावली में दिए गए सभी नियमों को अच्छी तरह समझ लिया है।
- 2) मैंने नियमावली के नियम संख्या-3 को विशेषतः पढ़ लिया है और अब मैं जानता हूँ कि, रैगिंग क्या है।
- 3) मैंने नियमावली के नियम संख्या 7 और 9.1 को अच्छी तरह पढ़ लिया है व अब मुझे यह अच्छी तरह पता है कि यदि मैं रैगिंग को उत्साहित
करता/करती, अथवा रैगिंग को उत्साहित करने के किसी षडयंत्र में प्रत्यक्ष अथवा परोक्ष रूप से शामिल पाया गया/गई तो मैं सख्त
अनुशासनिक कार्यवाही का अधिकारी होंगा/होंगी।
- 4) मैं यह वादा करता हूँ कि:
क) नियमावली के नियम 3 में दिए गए किसी भी तरह के बर्ताव या कार्य जो रैगिंग की परिभाषा में है मैं शामिल नहीं होंगा/होंगी।
ख) मैं किसी भी प्रकार के रैगिंग को उत्साहित करने या मजबूर करने वाले किसी भी कार्य में शामिल नहीं होंगा/होंगी। जो नियम
संख्या-3 के अर्न्तगत रैगिंग की परिभाषा में आते हैं।
- 5) मैं यह विश्वास दिलवाता/दिलाती हूँ कि यदि मैं नियम 9.1 के अर्न्तगत रैगिंग का दोषी पाया जाता/जाती हूँ तो फौजदारी कानून के
अतिरिक्त अन्य किसी भी कानून के, जो भी उस समय लागू हो, के अर्न्तगत सजा का अधिकारी होंगा/होंगी।
- 6) मैं यह घोषणा करता/करती हूँ कि, मैं देश के किसी भी संस्थान द्वारा रैगिंग को उत्साहित करने या उत्साहित करने के षडयंत्र में शामिल होने
की वजह से निर्वासित अथवा प्रवेश से रोका नहीं गया/गई हूँ। मैं यह भी घोषणा करता/करती हूँ कि, यदि उपरोक्त जानकारी झूठी पाई
जाती है तो मेरा प्रवेश रद्द किया जा सकता है।

घोषणा की तिथि : दिन माह साल

घोषणाकर्ता के हस्ताक्षर
नाम

सत्यापन:

मैं यह सत्यापित करता हूँ कि, घोषणा पत्र में दिए गए तथ्य मेरी जानकारी अनुसार सही हैं एवं घोषणा पत्र का कोई भी भाग न तो गलत
है और न ही मैंने किसी तथ्य को छिपाया है।

स्थान :

तिथि :

घोषणाकर्ता के हस्ताक्षर
नाम

Notary Public

To be submitted on stamp paper of Rs 100/- and Duly Attested by Notary Public

Undertaking and pledge by the candidate

1. I _____ (Name of candidate) son/daughter of
Shri _____ (name of Father) and permanent resident of

_____ Pin code _____ undertake
that I have read all the Rules and Regulations and information of admission and counseling procedure as
indicated in the Prospectus of MBBS/BDS for the Academic Session 2017-18 of Adesh University.
2. I declare that I would not seek migration to any other Institution at any time during the course nor shall I leave the
studies in midstream without completing the full course.
3. I also undertake that in case, I seek migration to any other institution at any time during the course or if I leave my
studies in midstream without completing the full course, I undertake to pay the balance of the tuition fee for the
remaining duration of the course including other dues as fixed by the University.
4. I undertake that all the information provided by me to the university for admission to MBBS/BDS course is
correct to the best of my knowledge and belief and I have not concealed any information.
5. I agree to observe and abide by all the rules and regulations of the Institution in which I may be admitted,
including those with regard to programme of studies, syllabus, scheme of examination, examination rules and
the hostel rules that may be laid from time to time by Adesh University during the period of my studies and I will
not associate myself with any activity prejudicial to the discipline of Institution.
6. I understand that I shall be required to submit the Bank Guarantee as per clause 14 of the prospectus before the
date of joining the course failing which my admission will automatically stand cancelled and I shall have no
claim whatsoever to admission thereafter.
7. I fully understand that for any violation or infringement of rules and regulations, disciplinary action can be taken
against me by the authorities which may include cancellation of the candidature.
8. I certify that I am not involved in any illegal activity and no criminal case is pending against me in any court of
law.
9. I certify that I have not passed the qualifying examination from more than one Board/University/any other
examining body.
10. I undertake that if I have been found indulged in ragging in the past or in future/my admission may be refused I
shall be expelled from the institution.

Signature of Parent/Guardian _____

Signature of Candidate _____

11. I understand that if at any stage, it is found that I have provided any wrong information to seek admission, my admission shall stand cancelled automatically and I shall have no claim whatsoever, on the seat or the dues paid to the institution in addition I understand that I have to pay all the balance fee for the entire course.
12. I have gone through the university prospectus and undertake to abide by terms and conditions laid therein.

Male Candidate shall affix their **Left** Thumb Impression

Thumb Impression

Photograph

Full Signature of the Candidate

Female Candidate shall affix their **Right** Thumb Impression

Date : _____

Undertaking and pledge by the Parent/Guardian

13. I certify that my ward Mr./Ms. _____ has taken admission in MBBS/BDS Course with my knowledge and consent and that I hold myself responsible for his/her good conduct and his/her maintenance and any payment of fee during the stay at Institution. The entries made by him/her in the Admission Forms are correct to the best of my knowledge and belief.
14. I certify that my ward Mr./Ms. _____ has not passed the qualifying examination from more than one Board/University/any other examining body.
15. I understand that I shall be required to submit the Bank Guarantee as per clause 14 of the prospectus before the date of joining the course failing which my admission will automatically stand cancelled and I shall have no claim whatsoever to admission thereafter.

Date : _____

Signature of Parent/Guardian _____

Name of Parent/Guardian _____

Guardian's relationship with the candidate _____

Solemnly affirmed and signed in my presence on this _____ day of _____ month of, _____ year _____, after reading the contents of this affidavit.

Notary Public