(To be typed in Non- Judicial Stamp Paper as per State Rules)

	(,	, <b>F</b>			F ~		
		AFFIC	AVIT BY T	HE STUD	ENT		
I,	(full					registration/enrolment	number
S/O d/o M1							,having been
admitted to (na							
have received a	a copy of tl	ne UGC Re	gulations on	curbing th	e menace of R	Ragging in Higher Educa	ational
institutions, 20	09 (heraeir	n after calle	d the "Regul	ations") ca	arefully read a	nd fully understood the	provisions
contained in th	e said Reg	ulations.	_	•	•	•	_
2. I have, in pa	rticular, pe	ruse clause	3 of he Regu	ılations an	nd am ware as	to what constitutes ragg	ing.
	inistrative a	action that i	s liable to be	taken aga	inst me in case	Regulations and am fulle I am found guilty of oging.	
4. I hereby sole	emnly aver	and undert	ake that				
		•	ehaviour or a the Regulati		y be constitute	ed as	
	•	•		•	ugh any act of of the Regulati	commission or omissions.	n that
	ithout prej	udice to any	y other crimin	nal action		ent according to clause the second se	
the country on	account of urther affi	being foun rm that, in	d guilty of, a	betting or	being part of	dmission in any institut a conspiracy to promo ntrue, I am aware that m	ote,
Declared this	da	ay of	montl	ı of		year.	
				Signatur	e of deponent		
				Name:			
VERIFICATIO	ON						
Verified that the and nothing ha					et of my knowl	edge and no part of the	affidavit is false
Verified at	(Place) on	this the	(Days) of (n	nonth) (Ye	ear).		

Signature of deponent

Solemnly affirmed and signed in my presense on this the after reading the contents of this affidavit.

(Days) of (month) (year)

OATHCOMMISSIONER

Note:All he affidavits/indemnities(on stamp paper) have to be submitted only at the time of reporting for classes (not when appearing for the Entrance Exam)

## (To be typed in Non- Judicial Stamp Paper as per State Rules) AFFIDAVIT BY PARENTS/GUARDIAN

I, Mr ,/Mrs./MS,	,(full name of the			
parent/guardian) father/mother/guardian of.(full name of studer	nt with admission/registration/enrolment number,			
having been admitted to (name of the institution), have received Menace of Ragging in Higher Educational Institutions, 2009, (land fully understoodthe provisions contained in the said Regulation).	nereinafter called the "Regulations"), carefully read			
2. I have, in particular, perused clause 3 of the Regulations and	am aware as to what constitutes ragging.			
<ol> <li>I have also, in particular, perused clause 7 and clause 9. penal and administrative action that is liable to be taken of or abetting ragging, actively or passively, or being par</li> </ol>	against my ward in case he/she is found guility			
2) I hereby solemnly aver and undertake that				
<ul> <li>a) My ward will not indulge in any behaviour or act the the Regulations.</li> </ul>	at may be constituted as raggig under clauses 3 of			
b) My ward will not participate in or abet or propagate may be constituted as ragging under clause 3 of the				
3) I hereby affirm that, if found guilty of ragging, my ward of the Regulations, without prejudice to any other crim under any penal law or any law for the time being in fo	inal action that may be taken against my ward			
4) I hereby declare that my ward has no been expelled or country on accoun on being found guilty of, abetting or and further affirm that ,in case the declaration is found becancelled.	r being part of a conspiracy to promote, ragging;			
Declared thisday ofmonth of _	year.			
	Signature of deponent			
	Name:			
	Address:			
	Telephone / Mobile No.			
VERIFICATION  Verified that the contents of this affidavit are true to the best of false and nothing has been concealed or misstated therein.	of my knowledge and no part of the affidavit is			
Verified at ( <u>place</u> ) on this the <u>(day)</u> of <u>(month)</u> , <u>(year)</u>				
	Signature of deponent			
Solemnly affirmed and signed in my presence on this the (day) of (month), (year) after reading the contents of this affidavit				
	OATH COMMISSIONER			

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(To be typed in Non- Judicial Stamp Paper as per State Rules)

TO:						
THE REGISTRAR AMET UNIVERSITY						
SIR,						
INDEMNITY FOR PERSONAL SAFETY						
This is to state that I,						
son of						
have joined the GME course, on my own accord and I am aware of he personal safety aspects to be maintained whilst under training. I agree to abide with the rules of the AMET University and will keep myself updated with any alterations to rules in the future during the tenure of my training.						
In particular I assume all risk and expenses towards personal injury, loss of life, hospital,medical, repatriation expenses,loss or damage to property or any other loss or damage whatsoever and howsoever caused.						
I confirm that I shall maintain strict discipline and adhere to all safety procedures during my stay a the university, an at any oher location I may be snt to for further training, for the course.						
I also confirm that I will not enter the swimming pool without permission and supervision. I will not hold AMET University or any staf thereof responsible for any injury that I may suffer due to any breach of this undertaking						
Further I expressly agree that the AMET University, or ay oher organisation involved in the training shall not be held responsible not with standing any express or implied condition or warranty to the contrary, statutory or otherwise.						
I declare that I have given all the medical details an I will not houndisclosed medical reports.	old the university responsible for any hidden/					
(SIGNATURE OF CANDIDATE)	(SIGNATURE OF PARENT/GUARDIAN)					
NAME:	NAME:					
Date:	RELATIONSHIP:					
(To be typed and signed by you and your parent/guardian)						

Note:All he affidavits/ indemnities(on stamp paper) have to be submitted only at the time of reporting for classes (not when appearing for the Entrance Exam)

## (To be typed in Non-Judicial Stamp paper as per State Rules)

## AFFIDAVIT BY THE STUDENT

This is to state that, I son of have joined the GME Course. I hereby solemnly aver and undertake that documents submitted by me are Genuine, in case the undertaking is found to be untrue, the Admission of ward is liable to be cancelled and Candidate will be De-barred from the University and can precede Criminal action that may be taken against ward.							
Declared thisday ofr	month of Year						
		Signature of deponent Name:					
<u>Verification</u>							
Verified that the contents of this affidavit are true to be the best of my knowledge and no part of the affidavit is false and nothing has been concealed are misstated therein.							
Verified atplace on t	this the (day) of (month),	(Year)					
Solemnly affirmed and signed in my pathis affidavit.	presence on this the (day)	of (month), (Year) after reading the contents of					

OATH COMMISSIONER