

ANNEXURE I
AFFIDAVIT BY THE STUDENT

I, _____ (full name of student with admission/registration/enrolment number) S/o , D/o Mr./Mrs./Ms. _____, having been admitted to Rajshree Medical Research Institute, Bareilly, 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 am aware as to what is constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and 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 construed 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 construed 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 Student

Name:.....

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 noting has been concealed or misstated therein.

Verified at _____ (Place) on this the _____ (day) of _____ (month) , _____ (year)

Signature of Parents

ANNEXURE II
AFFIDAVIT BY THE PARENT/GUARDIAN

I, Mr./Mrs./Ms. _____ (full name of parent/guardian) father/mother/guardian of _____ (full name of student with admission /registration/enrolment number, solemnly affirm and declare that my ward named above has been admitted in Rajshree Medical Research Institute, Bareilly, I hereby confirm that I 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 am aware as to what is construed as ragging.
- 3) I have also, in particular, perused clause 7 & 9.1 of the Regulations and am fully aware of the penal & administrative action that is liable to be taken against my ward in case he/she is 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) My ward will not indulge in any behavior or act that may be construed as ragging under clause 3 of the Regulations.
 - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be construed as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that my ward has 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, the admission of my ward is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of Parents

Name:

Address:

Telephone/Mobile No.:.....

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 _____ (place) on this the _____ (day) _____ of _____ (month) _____ (year).

OATH COMMISSIONER/NOTARY

AFFIDAVIT FOR RULES & REGULATIONS

I , _____ (full name of student with admission/registration/enrolment number) S/o , D/o Mr./Mrs./Ms. _____, having provisionally been admitted at Rajshree Medical Research Institute, Bareilly, do hereby declare that -

- 1) I hereby declare that I am medically fit for the MBBS course and all the documents submitted by me for my admission are True and genuine. My admission may be cancelled if any of the documents submitted by me is found forged.
- 2) I will follow all the rules & regulations of the institute or mentioned in institute brochure. I will not indulge in any act which may bring bad name to the institute.
- 3) I have informed that Hostel is mandatory for all the students and I shall keep my room neat & clean. Any loss of hostel amenities will liable a cash fine. I know that non-vegetarian food inside the campus is strictly prohibited.
- 4) I will attend all academic activities of the institute in proper dress code, as prescribed, alongwith identity card. I will not use any alcoholic item / tobacco in the institute premises.
- 5) I will not keep any vehicle within the RMRI premises without the permission of the Institute authorities.
- 6) I shall submit my yearly fee timely, as prescribed, and will be liable to a cash fine if Fee submitted late.
- 7) I will attend the classes/practical/postings as per schedule & maintain min. of 75% attendance, as per MCI norms.
- 8) I also understand that if I become unsuccessful in achieving the required attendance OR required minimum marks i.e. 35%, as per MCI norms, in the internal assessment, I shall be detained and not allowed to appear in the examinations.
- 9) It is my sole responsibility to keep my parents/guardians informed/updated regarding my academic performance.
- 10) I will never use/keep my mobile phone in the academic block/hospital, if found, the mobile shall be seized. Heavy electrical appliances are strictly prohibited, in the hostel rooms. If found using the same the equipment/s shall be seized.
- 11) College will not be liable for any compensation or claim, in any circumstances for any injury/mishappening, inside or outside the premises during the course.
- 12) After completion of MBBS course I have to undergo one year of compulsory rotatory internship from Rajshree Medical Research Institute, Bareilly only and will not be allowed to complete the internship outside the institute.
- 13) Fee once submitted will not be refunded, in any circumstances. I shall be bounded to pay full course of fee in case of withdrawal of admission in any circumstances, during the course.
- 14) I will accept any punishment if found involved in any activity which is against the rules & regulations of the Institute.

Declared this _____day of _____month of _____Year.

Signature of Student

Name:.....

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 noting has been concealed or misstated therein. I also accept and give my consent for all the above mentioned contents.

Signature of Parents

Name:.....

GAP AFFIDAVIT

I , _____ (full name of student with admission/registration/enrolment number)
S/o , D/o Mr./Mrs./Ms. _____, having provisionally been admitted at Rajshree Medical
Research Institute, Bareilly, do hereby declare that -

- 1) I had passed my Intermediate Examination (10x+2) in the year _____
- 2) I declare that I did not take admission in any course of any institution / university after completion intermediate and was preparing for the competitive examination.

OR

- After completing Intermediate I had joined (Course name)
from(college name with city) / Not joined any course.
- 2) There was a Gap of years, in my study (after completion of Intermediate).

Declared this _____ day of _____ month of _____ Year.

Signature of Students

Name:.....

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 _____(Place) on this the _____(day) of _____(month) , _____(year)

Signature of Parents