

DECLARATION

I, Mr/Miss/Mrs _____ D/O / S/O Mr _____ and
Mrs _____ resident of _____
_____ admitted in
_____ course for the academic year _____ solemnly declare that:

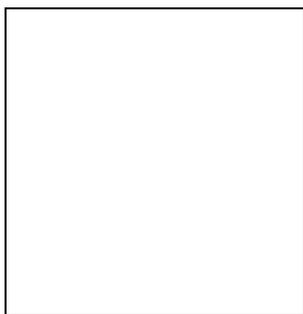
1. I have not taken admission or continuing in any other course at the time of admission in King George's Medical University, UP, Lucknow. At present also, I am not enrolled in any other regular course besides the paramedical diploma course at KGMU Institute of Paramedical Sciences, King George's Medical University UP, Lucknow. If I apply or opt for any other course in future during my tenure, I will get the no objection certificate from the Dean, Paramedical Sciences or equivalent competent authority for the same. I understand that both my caution money as well as fees will be forfeited in event of leaving the course without passing the exit exam. If I am found to pursue any other regular course apart from present diploma course, my diploma shall be cancelled and my admission will become null and void. In such situation I am not entitled to claim refund of fees including caution money.
2. I promise to abide by the University rules and regulations in practise as well as imposed from time to time. I promise to wear the specified apron along with nameplate throughout my presence in the University premises.
3. I agree to pay fees as imposed by State Medical Faculty and KGMUIPMS from time to time.
4. I understand that my roster of posting may involve routine as well as emergency hours.
5. I understand that at least 75% attendance is mandatory to appear in the final examination.
6. I will not take part or involve myself in any anti-social activity or act of misbehaviour in the University premises. If found guilty for so, may be rusticated / expelled / heavily fined as per the discretion of the disciplinary committee.
7. I state that all the documents furnished for eligibility for admission in the _____ course are real and have been duly released by the competent issuing authorities. If any of them is found to be fake at any time during or after the admission, I am liable to expulsion from the University.

Signature of the Student

Name of the Student

Course and Year

Signature of the Parent / Guardian



Photograph

Date:

Place:

Name of the Parent / Guardian