## **DECLARATION**

		D/O / S/O Mr							
			re	esident of					
		course fo	r the academ	nic year		solem	ınly declare	admitted that:	in
1.	George's Menure, I equivalent	/ledical U will get t compete	niversity, UP the no object that authority	, Lucknow. ction certif for the sar	If I apply or ficate from me. I unders	r opt for the Dea tand tha	any other an, Parame at both my	admission in course durin dical Science caution mon the exit exam	g my es or ey as
2.	time to tir	ne. I pror		the specif				l as imposed e throughou	
3.	l agree to p	ay fees a	s imposed by	State Med	ical Faculty 1	from tim	e to time.		
4.	I understa	nd that m	y roster of po	osting may i	nvolve routi	ine as we	ell as emerg	ency hours.	
5.	l understa	nd that at	least 75% at	tendance is	mandatory	to appe	ar in the fina	al examinatio	n.
6.	I will not take part or involve myself in any anti-social activity or act of misbehavior in the University premises. If found guilty for so, may be rusticated / expelled / heavily fined as potthe discretion of the disciplinary committee.								
7.	course are	real and und to be	have been o	duly release	ed by the co	mpeten	t issuing au	thorities. If a	iny of
						_	Signati	ure of the Stu	udent
						_	Na	me of the Stu	udent
		ograph of Student				_		Course and	Year
			J			Signa	ture of the I	Parent / Guai	rdian
	Date:								
	Place:					N	ame of the I	Parent / Guai	rdian