PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT (ON NON- JUDICIAL STAMP PAPERS OF RS.100/- WITH NOTARY)

FORM I (National Medical Commission)

[See sub-clause(a) of clause (i) and sub clause (a) of clause(ii) of sub-regulation(2) of regulation7]

FORMAT OF UNDERTAKING BY THE STUDENTS

_(Full Name in Block Letters) _____ Son/Daughter of

Mr./Mrs./Ms	(Full N	lame in Block	Letters)		admitted	
to the course of MBBS	_(Name of course with	n Admission	No	_At Governm	nent Medical	
College, Wanaparthy (Nar	me of college/institution	on)-affiliated t	to <u>Kaloji Na</u>	arayan Rao	University of	
Health Sciences(Name of	University)- have rece	ived a copy	of the Nati	onal Medical	Commission	
(prevention and prohibi	tion of Ragging in	Medical Co	olleges and	Institutions)	Regulations,	
2021(hereinafter referred to	as the said regulations).				
2. I have carefully read and	fully understood the p	rovisions in the	e said regulat	tions.		
3. I have particularly perus understood what constitute	•	gulations 3 and	d 4 of the said	l regulations a	nd have fully	
4. I have also in particular perused the provisions of chapter IV and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.						
5. I here by undertake that-						
(i) I will not indulge in any behavior or act that may come under the definition of ragging as may be constituted under regulation 3 of the said regulations;						
(ii) I will not participate that may be constituted un			-	ded but not lin	nited to those	
(iii) I will not hurt anyone p	ohysically or psycholog	ically or cause	any other ha	rm.		
6. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.						
7. I also declare that I have passively, or being part of manner for these offences a liable to be cancelled/without	f a conspiracy to pror and further affirm that i	note ragging	and have ne	ver been pun	ished in any	
Signed on this the	day ofmonth of	yea	ar.			
				Signature		
			Jame: ddress:			
	Tel/Mobile No:					
Signature of Witness1: (Name of Witness 1): Address:						
Signature of Witness2: (Name of Witness 2):Address:						

Xerox copies of Aadhar cards along with Mobile Numbers of witness should be enclosed along with the bond.