

Undertaking by the Parent/Guardian regarding Anti Ragging Laws

(On Rs. 100 Stamp Paper)

1) I, Mr./Mrs./Ms _____ (full name of parent/guardian) father/mother/guardian of, _____ (full name of student with admission/registration/enrolment number), _____ having been admitted to **MBBS 1st Year** in _____ (name of the institution), have received a copy of the UGC Regulation 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 of what constitutes ragging.

3) I have also, in particular, perused clause 5 and clause 6.1 of the Regulations and am fully aware of the penal and 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 constituted 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 constituted 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.

7) I hereby declare that my ward will follow all the rules and regulations of the hostel and college otherwise institute has the full right to forfeit my security amount.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

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 _____ on this the _____ day of _____ month of _____ year.

Signature of deponent

Undertaking by the Student with respect to Anti Ragging Laws (on Rs. 100 Stamp Paper)

1) I, _____ Son/ daughter of Mr./Mrs. _____, having been admitted to _____ programme, at _____ have received the 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 of what constitutes ragging.

3) I have also, in particular, perused clause 5 and clause 6.1 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 constituted 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 constituted 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 deponent

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 _____ on this the _____ day of _____ month of _____ year.

Signature of deponent

Affidavit

(On stamp paper of Rs. 100)

In front of:- Director, G.S. Medical College and Hospital, Pilkhuwa District Hapur.

I,, son/daughter/wife of Shri.....and resident
of.....,
solemnly affirm under oath that:

1. My name and address stated above is correct.
2. I have taken admission to the MBBS programme being run at GS Medical College and Hospital, a constituent college of GS University, Peeplabandpur, NH-9, Near Railway Station, Pilkhuwa, District Hapur, U.P. 245304, in the session 2025-26 through the NEET-UG examination and counselling process.
3. I am fully responsible for the documents (photocopies) submitted to the college at the time of my admission or in the future.
4. If any error or fraud is found in the documents submitted by me, then the college will not be held responsible for that, and the college can take any action against me.
5. I will maintain a minimum of **75%** attendance at the college as per the university's rules. If my attendance falls below **75%**, the college has the full right to prevent me from taking my university examinations.

I affirm that I am fully aware of all the facts stated above and that no fact has been concealed by me.

Should any dispute arise on any point of law, the decision of the District Court at Hapur shall prevail.

Signature of the Deponent.....

Name.....

Father's/husband's name.....

Address.....

Date

Affidavit

(on stamp paper of Rs. 100)

In front of: Director, G.S. Medical College and Hospital, Pilkhuwa, District Hapur

I,, son/daughter/wife of Shri.....and resident of.....,

solemnly affirm under oath that:

1. My name and address stated above is correct.
2. I have taken admission to the MBBS programme being run at GS Medical College and Hospital, a constituent college of GS University, Peeplabandpur, NH-9, Near Railway Station, Pilkhuwa, District Hapur, U.P. 245304, in the session 2025-26 through the NEET-UG examination and counselling process.
3. I shall follow all the rules and regulations of GS Medical College and Hospital and the GS University at all times. Should I be ever found guilty of violating the rules and regulations of GS Medical College and Hospital and GS University, the College and University shall be free to take any disciplinary action it deems fit against me.
4. I stand informed that consumption of tobacco, alcohol and drugs is strictly prohibited in the College and hostel premises. Should I be ever found guilty of violating this rule, the College and University shall be free to take any disciplinary action it deems fit against me.
5. I shall remain committed to pay the fee for the entire duration of MBBS programme to the College. The fee shall include the academic(tuition) fee, hostel fee, miscellaneous fee, etc. and also the security deposit. This shall be in conformity with the fee prescribed by the Admission and Fee Regulation Committee set up by the Government of Uttar Pradesh and/or the Hon'ble High Court and/or the Hon'ble Supreme Court.
6. I recognize that GS Medical College and Hospital is a constituent college of GS University, Hapur, and the University is run under the Uttar Pradesh Private University Act, 2019. I shall therefore be committed to pay the External Examination Fee to GS University for each of the University Professional Examination. This charge shall be as levied by GS University. I also recognize that the External Examination Fee shall be charged separately for the University Supplementary Examination, and shall be charged to those candidates who are required to repeat the regular examination.
7. Should under any circumstance, I am to leave the College or its hostel before the completion of my MBBS programme, I shall be required to pay the entire fee that shall fall due for the entire remaining period of the MBBS programme to the College. The fee shall include the academic(tuition) fee, hostel fee, miscellaneous fee, etc. Failing which, the College would be free to take any action it deems fit against me.

I affirm that I am fully aware of all the facts stated above and that no fact has been concealed by me.

Should any dispute arise on any point of law, the decision of the District Court at Hapur shall prevail.

Signature of the Deponent.....

Name.....

Father's/husband's name

Address

Date

Affidavit

(On Rs. 100 stamp paper)

In front of:- Director, G.S. Medical College and Hospital, Pilkhuwa District Hapur.

I,, son/daughter/wife of Shri.....and resident
of.....,
solemnly affirm under oath that:

1. My name and address stated above is correct.
2. That I have passed the examination of in the year
3. That after passing the examination of in the year, I have a gap
of years from the year to During this
period, I have not been a regular student in any government or non-government
institution/college, and I have not done any illegal work during this period.

I affirm that I am fully aware of all the facts stated above and that no fact has been concealed by
me.

Should any dispute arise on any point of law, the decision of the District Court at Hapur shall
prevail.

Signature of the Deponent.....

Name.....

Father's/husband's name.....

Address.....

Date