## ANNEXURE I AFFIDAVIT BY THE STUDENT

I,	(full	name of	student with
admission/registration/enrollment	number)s/o,	d/o	Mr./Mrs./Ms
	, having	been	admitted to
(name of the	institution), ha	ve received a	copy of the UGC
Regulations on Curbing the Menace of	Ragging in High	er Educational	Institutions, 2009,
(hereinafter called the "Regulations") ca	refully read and	fully underst	good the provisions
contained in the said Regulations.			
1) I have, in particular, perused clause 3.4 o	f the Regulations a	and am aware a	s to what constitutes
ragging.	_		
2) I have also, in particular, perused clause	7 of the Regulatio	ns and am full	y aware of the penal
and administrative action that is liable to l	oe taken against n	ne in case I ar	n found guilty of or
abetting ragging, actively or passively, or be	eing part of a consp	oiracy to promo	ote ragging.
3) I hereby solemnly aver and undertake that	t		
a) I will not indulge in any behaviour or ac	t that may be cons	stituted as ragg	ing under clause 3.4
and clause 4 of the Regulations.			
b) I will not participate in or abet or propagation	gate through any a	act of commiss	ion or omission that
may be constituted as ragging under clause	3.4 and clause 4 of	f the Regulation	1S.
4) I hereby affirm that, if found guilty of ra-	gging, I am liable	for punishmen	according to clause
7 of the Regulations, without prejudice to an	ny other criminal a	action that may	be taken against me
under any penal law or any law for the time	being in force.	_	_
5) I hereby declare that I have not been expense.	elled or debarred f	rom admission	in any institution in
the country on account of being found g	uilty of, abetting	or being part	of a conspiracy to
promote, ragging; and further affirm that,	in case the declar	ration is found	to be untrue, I am
aware that my admission is liable to be canc	elled.		
Declared thisday of mor			
Signature of deponent			
Name:			
VERIFICATION			
Verified that the contents of this affidavit ar	e true to the best of	of my knowled	ge and no part of the
affidavit is false and nothing has been conce			
Verified at(place) on this	s the (	day) of	(month),
(year ) .			
<u> </u>			
Signature of deponent			

## **ANNEXURE II**AFFIDAVIT BY PARENT/GUARDIAN

I, Mr./Mrs./Ms.	_ (full name of
parent/guardian) father/mother/guardian of	, (full
name of student with admission/registration/enrollment number), having been	en admitted to
(name of the institution), have received a copy of the UC	GC Regulations
on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (he	reinafter called
the "Regulations"), carefully read and fully understood the provisions contain	ned in the said
Regulations.	
1) I have, in particular, perused clause 3.4 of the Regulations and am aware as to v	vhat constitutes
ragging.	
2) I have also, in particular, perused clause 7 of the Regulations and am fully awa	are 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 prome	ote ragging.
3)I hereby solemnly aver and undertake that	
a) My ward will not indulge in any behaviour or act that may be constituted as	ragging under
clause 3.4 and clause 4 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 3.4 and clause 4 of the R	legulations.
4)I hereby affirm that, if found guilty of ragging, my ward is liable for punishme	nt according to
clause 7 of the Regulations, without prejudice to any other criminal action that	t may be taken
against my ward under any penal law or any law for the time being in force.	
5) I hereby declare that my ward has not been expelled or debarred from ad	mission in any
institution in the country on account of being found guilty of, abetting or b	eing 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 thisday 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 an	d 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 ) .	
Circulation of London	
Signature of deponent	