

KONGU ARTS AND SCIENCE COLLEGE



NANJANAPURAM, ERODE-638 107.

AFFIDAVIT BY THE STUDENT

1.	l,				(full name of stude	nt with admission registration			
	enrolment	number) S/o [D/o Mr./Mrs./Ms			, having been admitted to			
				(nam	e of the institution), h	nave received a 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.	ا have, in	I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.							
3.	I have also, in particular, perused clause 7 and clause 9.1 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 behaviour 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 th	is	day of	month of	year.				
						Signature of deponent			
					Name:				
				VERIFICATION					
		e contents of aled or missta		to the best of my knowle	edge and no part of the	affidavit is false and nothing			
Ver	ified at	(pl	ace)on this the	(day)of	(month),	(year).			
						Signature of deponent			
		ed and signed this affidavit		the(day) of_	(month),	(year) after reading			
						OATH COMMISSIONER			



KONGU ARTS AND SCIENCE COLLEGE



NANJANAPURAM, ERODE-638 107.

AFFIDAVIT BY PARENT / GUARDIAN

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								
	a 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 claus	I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.							
3)	I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal a 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 for being part of a conspiracy to promote ragging.								
4)	I hereby solemnly aver and undert	ake that							
	 a) My ward will not indulge in any behaviour 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)	nstitution in the country on d further affirm that, in case								
	Declared this day o	fmont	n of	year.					
					Signature of deponent				
			Name:						
			Address:						
		Telephone/Mobile No.:							
VERIFICATION									
	ified that the contents of this affidav been concealed or misstated therei		f my knowledge ar	nd no part of the	affidavit is false and nothing				
Ver	ified at(place)on this	the(day)of	(m	onth),	(year).				
					Signature of deponent				
Solemnly affirmed and signed in my presence on this the(day) of(month),(year) after reading the contents of this affidavit.									
					OATH COMMISSIONER				