

15. **Undertaking and pledge by the candidate:-**

I solemnly declare that all the facts stated above are true and correct. In case any information if found incorrect at any state, my candidature may be cancelled and I shall have no claim whatsoever against the College or the University, I pledge to abide by the rules and regulations of the institution and the University as given in the Prospectus and to observe the Code of conduct given therein. I am joining this College with the express permission of my father/guardian. I have noted that my admission is PROVISIONAL subject to registration by the Baba Farid University of Health Sciences, Faridkot.

FULL Signature of candidate
Date: _____

16. **Undertaking by Parent/Guardian:-**

I certify that my daughter/ward Ms _____ has submitted this application with my knowledge and consent and that I hold myself responsible for her good conduct and her maintenance and any payment of fee during the stay at College or even she leave the College in midstream. The entries made by her in the Admission Form are correct to the best of my knowledge and belief.

Date _____

Signature of Parent/Guardian
Name of Parent/Guardian _____

CHECKLIST OF ENCLOSURES

(Attested copies of the following certificates)

Checked by:

	Candidate	College official
i) Completion Certificate from the Head of the Institute from where passed the GNM examination (Form No.1)	<input type="checkbox"/>	<input type="checkbox"/>
ii) Registration Certificate with PNRC, Chandigarh	<input type="checkbox"/>	<input type="checkbox"/>
iii) Detail Marks Card 10+1	<input type="checkbox"/>	<input type="checkbox"/>
iv) Detail Marks Card 10+2	<input type="checkbox"/>	<input type="checkbox"/>
v) Matric or equivalent certificate for date of birth	<input type="checkbox"/>	<input type="checkbox"/>
vi) Detail Marks Card 3 rd Year GNM examination	<input type="checkbox"/>	<input type="checkbox"/>
vii) Certificate in support of claim under reserved category as per specimen given in prospectus (Form N.8 or 9)	<input type="checkbox"/>	<input type="checkbox"/>
viii) Residence Certificate	<input type="checkbox"/>	<input type="checkbox"/>
ix) Gap year affidavit in original (Annexure I)	<input type="checkbox"/>	<input type="checkbox"/>
x) Affidavit in original (not availed any Residence benefit in any other state) (Annexure II)	<input type="checkbox"/>	<input type="checkbox"/>
xi) Experience certificate, if any	<input type="checkbox"/>	<input type="checkbox"/>
