AFFIDAVIT (Specimen)

(Stamp paper of Rs. 100/-)

- 1. I solemnly declare that all the particulars mentioned in the admission form are TRUE and CORRECT and I fully understand that if any of the statements made in the application is found to be incorrect or any document produced with this form is false/fake, I would be liable to refusal for admission to the medical/dental institution, if otherwise eligible for admission and admitted, would be liable to be expelled from the institution at any time during the course of my studies in which case all fee and other dues paid by me to the institution shall be forfeited and any further departmental or legal action which the Government may deem fit to take.
- 2. I am NOT already admitted to any medical/dental institution of the country, and if admitted, I will forgo my earlier admission and apply afresh.
- 3. I also solemnly declare that, if admitted, I will abide by the discipline, rules, and regulations of the institution as enforced at present and made from time to time by the institution authorities in future. I will concern myself only with the academic activities and such extracurricular activities, which are allowed by the institution for the healthy growth of body and mind. I undertake that I will not take part in any political activity or agitation and I will not become a member of any student wing of political, sectarian or caste-based parties of Pakistan. In matters of discipline, the decision of the head of the institution will be final and binding on me and I will not challenge that decision in any court of law in the country. I will be regular in paying institution's dues and will be punctual in attending my classes. I will not absent myself from teaching programmes without prior permission of the authority.
- 4. I undertake that so long as I am a student of the institution, I will do nothing either inside or outside the institution, hostels and hospital premises that may interfere with its orderly administration and discipline or may bring the institution or its administration into disrepute.

If I violate the above affidavit, I shall be liable to appropriate punishment(s) prescribed in the prospectus of the Government medical/dental institutions of the Punjab.

	(Signature	(Signatures of the candidate)	
	(Name o	(Name of the candidate)	
	Address:		
	Dated	Phone	
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