

**Undertaking from Parents/Guardian for attending Regular Classes**

(To be filled in triplicate form)

Date:.....

To

The Director/Dean/Principal/Prof. In-charge/Head .....

Institute/Faculty/College/Department .....

AIIMS, Gorakhpur -273008

Sir/Madam,

I Mr. /Ms..... Father/Mother/Legal Guardian

of Mr. /Ms ..... Student of class ..... course

..... Enrollment no. ....

Contact no. .... for the session ..... do hereby undertake and

confirm that I hereby permit my son/daughter/ward to go to AIIMS, Gorakhpur – 273008, Uttar Pradesh to

attend the regular classes during the COVID – 19 pandemic and the University authorities/administration will

not be responsible if my son/daughter/ward contaminate any COVID – 19 symptoms after attending the regular

classes. I do hereby confirm that my son/daughter/ward will compulsorily wear face masks within the university

campus and follow all the COVID – 19 protocols such as washing hands, using sanitizers and maintaining

social distancing etc.

(Signature of Father/Mother/Legal Guardian)

(Signature of Student)

Address: .....

.....

.....

Contact No. ....

Contact no. ....

*\*Note- Parents should not send their children/ward to University, if the child is not feeling well/sick as the attendance is not compulsory and entirely depends on parental control.*

**AFFIDAVIT TO BE SIGNED BY PARENT / GUARDIAN AND STUDENT  
(ON RS. 10/- STAMP PAPER DULY NOTARISED)  
UNDERTAKING BY THE STUDENT**

I.....  
.....S/o, D/o. Mr./Mrs..... resident  
of .....

.....hereby solemnly affirm and declare as under:

1. I am joining as a student of MBBS at All India Institute of Medical Sciences (AIIMS) Gorakhpur.
2. I have carefully read and fully understood the UGC Regulations on curbing the menace of ragging in higher educational institutions, 2009 under Section 26 (1)(g) of the University Grants Commission Act, 1956 to be followed by all the students of AIIMS.
3. I have carefully read and fully understood the rules and regulations of the AIIMS, Gorakhpur.
4. I hereby solemnly affirm that:
  - I will abide by the institute's rules and regulations in force from time to time.
  - I will not indulge or involve myself in any behavior or act that may come under the definition of ragging.
  - I will not participate in or abet or propagate ragging in any form.
  - I will not hurt anyone physically or psychologically or cause any other harm.
5. I have fully understood that if found indulging or guilty of any aspect of ragging within or outside AIIMS campus, I may be punished as per the provisions of the AIIMS regulations/directive mentioned above and / or as per the law in force and for which I will be solely responsible.
6. I will accord due importance to the infrastructure of the hostel/institution and understand that in the event of damage, the institution may penalize me (including suspension) as an individual or as part of a group.
7. I solemnly affirm that I will strictly refrain from smoking, consumption of alcoholic drinks/drugs, gambling, intimidation or violence, willful damage to property, entering the hostel premises in intoxicated state and shouting and using abusive language in the hostel or around hostel premises and campus. If I am found doing so, I am liable for punishment including suspension.
8. I assure that I shall NOT divulge any institutional information to social media without concurrence of institutional media management committee. If found doing so, I may be held liable for punitive actions including suspension from the institute.
9. I also affirm that I will strictly follow the time schedule in the institute and hostel. If found otherwise then disciplinary action may be taken against me including suspension.
10. I certify that all documents submitted by me are authentic. Any false documentation will automatically lead to cancellation of my seat.

**Name and Signature of Deponent (Student)**

VERIFICATION: Verified at ..... on this ..... day of.....  
month .....year, that the above affidavit is true and correct.

**Undertaking by Parent / Guardian**

I ..... (Parent's/Guardian's Full name) do undertake full responsibility for actions of ..... (Name of the student) within campus and while he/she goes out of the Hostel/College/College Campus any time with /without permission of the Hostel authorities in writing.

I also understand that my ward will be liable to disciplinary action if he / she is found in breaking rules of the institute.

I will regularly monitor his / her academic progress including his attendance. I shall, under no condition, pressurize the authorities to manipulate attendance / internal assessment record of the student.

**Date:** ..... **Address & Contact no:** ..... **Name and Signature of (Parent/ Guardian)** .....

VERIFICATION: Verified at ..... on this ..... day  
of.....month .....year, that the above affidavit is true and correct.



Annexure III

ALL INDIA INSTITUTE OF MEDICAL SCIENCES  
KUNRAGHAT, GORAKHPUR - 273008  
Hostel Section

Allotted Room No .....

Date:

To,  
The Provost  
Hostel (Boys and Girls)  
AIIMS, Gorakhpur

SUB: APPLICATION FOR ALLOTMENT OF HOSTEL ACCOMMODATION  
(FORM MUST BE FILLED IN CAPITAL LETTERS)

Dear Sir/Madam,

I have joined the institute as MBBS student  
I wish to request that I may be allotted hostel accommodation in the AIIMS Hostel campus.  
I have read and hereby agree to abide by the hostel rules and regulations, in force.

My brief particulars are below.

PERSONAL DATA:

1. Student's Name (Full name in block letters) .....
2. Date of Joining: ..... Course:.....
3. Permanent Residential Address & contact number: .....
- .....Pin code:.....
3. Student's Email ID.....
4. Mobile no.....
5. Residence with STD code: .....
6. Date of birth .....
7. Nationality ..... Blood group.....

I declare that the information given above is true to the best of my knowledge. I agree that if any information furnished above is found to be incorrect my allotment is liable to be cancelled.

Date:

Signature of the Applicant

**FAMILY BACKGROUND:**

Affix self attested color photo of parents (Father)	Affix self attested color photo of parents (Mother)	Affix self attested color photo of Local Guardian
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1. Full name of Father: .....
2. Occupation of father .....Mobile No .....
3. Full name of Mother: .....
4. Occupation of Mother .....Mobile No .....
5. Parent / Guardian Email ID: .....
6. Tel. No (with STD code): Office: .....Residential: .....

**NEAREST LOCAL GUARDIAN (If any)**

Name and address of contact person who should be contacted (in case of emergency)

1. Name:.....  
Address:.....  
.....  
Tel.no (mob/res).....
2. Name: .....
- Address: .....
- .....
- Tel.no (mob/res).....

I request you to admit my ward Mr. /Ms. .... to the hostel. give an undertaking that he / she has read and will abide with all Rules and regulations of the hostel.

**Yours faithfully**

Date:

Signature of the Parent / Local Guardian

**DECLARATION TO BE SIGNED BY THE STUDENT**

I have read all the rules and regulations of the hostel. I hereby agree to abide by the rules and regulations of the hostel in force from time to time. I am liable for disciplinary action in case if any breach.

Date:

Signature of Student

Signature of Parent

Signature of Warden

Signature of Assist. Provost

Signature of Provost

**NOTE**

**Self-attested copies of the following documents should be submitted along with the hostel Application form**

1. Proof of residence (Parents and nearest local guardian)
2. A copy of Medical examination report
3. Three photographs (Each photo should have your full name and course name)

**DECLARATION TO BE SIGNED BY STUDENT**

(In case of double occupancy of rooms)

I have been informed that the hostel rooms will be provided on double occupancy basis .I will abide by all instructions of the AIIMS administration regarding changing room /shifting hostel.

I will be liable for disciplinary action in case of any breach.

Date

Signature of student

Signature of parent