# TIET/ADMN/ACA/FT/08(0) ANNEXURE-III

#### FORMAT OF MEDICAL CERTIFICATE

I certify that I have carefully examined	Mr./Ms	son/daughte
of Sh		His/her age is about
His/her Chest Measurement is		Unexpanded Cm
		Expanded Cm
His/her eyesight is upto the prescribed	standards.	
Details of glasses, if worn		
He/she has no disease or mental or boo	dily infirmity unfi	tting or likely to unfit him/her in the future for activ
outdoor service.		
Blood Group		
Marks of identification		
Thumb impression		
HEPATITIS "B" IMMUNISATION?	Yes	No
Dated		
		Signature of Gazetted Medical Officer (with official Seal)
		Signature of Candidate

## Format of Income Certificate (Not required for Candidates applying for PhD Programme)

## CERTIFICATE FROM THE HEAD OF THE OFFICE WHERE FATHER/GUARDIAN OF THE STUDENT IS EMPLOYED

Certified that Sh.			S/o S	h	a	and father of Mr./M	s.
			is employ	ed in this office as		and th	ıe
details of his mor	nthly salary a	are give	n below:				
Basic Pay (Rs.)	Grade pay	DA	CCA	Any other Allowa	ance	Total	
Place				Signature of Hea	d of Offic	e	
Date				(with official sea	I)		
			,	OR			
Declara			-	Public) to be depose	-	er/guardian	
	who is	not em	iployed but	is running his own k	ousiness		
				and			
hereby solemnly	declare that	l am n	ot employe	d anywhere and I am	carrying	on my own busines	S
(name of busine	ess)			at		(Place). M	ij
average gross mo	onthly incom	e is Rs.	•••••				
Place:				S	iignature	of Father/Guardian	
Date:							

Note: Candidates whose father/guardian has retired from Govt. service should produce pension certificate in support of their income at the time of counselling.

FORM	AT OF ANTI RAGGING A	AFFIDAVIT BY I	PARENT/ GUA	RDIAN		
instituti Educat	Mrs./Ms.  In) father/mother/guardia Ition/ enrolment number Ion) have received a cop Ional Institutions, 2009, (Ions contained in the said	by of the UGC hereinafter calle	Regulations* o	n Curbing the M	enace of raggi	ng in Higher
(* The	copy is also available on v	www.thapar.edu	)			
2.	I have, in particular, peru	sed clause 3 of	the Regulations	and am aware as	to what constit	utes ragging.
3.	I have also, in particular the penal and administra guilty of or abetting ragg	ation action that	is liable to be ta	iken against my v	ward in case he	/she is found
4.	I hereby solemnly aver	and undertake t	hat: 1. My ward	d will not indulge	in any behavio	ur or act that
	may be constituted as ra	agging under cla	use 3 of the Re	gulations.		
	2. My ward will not p that may be con	•		te through any ac e 3 of the Regula		n or omission
5.	I hereby affirm that, if for 9.1 of the Regulations, ward under any penal la	without prejudice	e to any other o	criminal action the		
6.	I hereby declare that my the country on account ragging; and further affi ward is liable to be canc	of being found rm that, in case	guilty of, abetti	ng or being part	of a conspiracy	to promote,
	Declared this		day of	mont	:h of	year.
 Signatu	re of Deponent					
Name:						
Addres	s:					
Telepho	one / Mobile No.:					
VERIFI	CATION					
	I that the contents of this nd nothing has been cond			my knowledge a	nd no part of th	ne affidavit is
Verified	l at	(place)	on this the	C	lav of	of month.
	year.	(p.a.cc)	· · · · · · · · · · · · ·		<u></u>	,
Signatu	re of Deponent	-				

Solemnly affirmed and signed in my presence on this the \_\_\_\_\_ day of \_\_\_\_ month of

year after reading the contents of this affidavit.

FORM	AT OF ANTI RAGGING A	FFIDAVIT BY TH	E STUDENT				
I,	ation/ enrolment number), an) having been admitted t f the UGC Regulations* o	 S/o D/o Mr. / Mrs	./ Ms.	(full nam	e of student v	vith admis	sion/ rent/
guardia	an) having been admitted	ιο		(name of th	e institution) h	ave receiv	ved a
copy of (herein Regula	after called the "Regulatio	n Curbing the Men"), carefully reac	enace of ragging I and fully unders	in Higher E stood the pro	ducational Insovisions contai	titutions, 2 ined in the	2009, said
(* The	copy is also available on w	ww.thapar.edu)					
2.	I have, in particular, perus	sed clause 3 of the	e Regulations and	d am aware a	as to what cons	stitutes rag	ıging.
3.	I have also, in particular, the penal and administra or abetting ragging, activ	tion action that is	liable to be take	en against m	e in case I am	found gui	
4.	I hereby solemnly aver a	nd undertake tha	t: 1. I will not inc	dulge in any	behaviour or a	act that ma	ay be
	constituted as ragging ur	ider clause 3 of th	e Regulations.				
	I will not participa     may be constitute	te in or abet or p ed as ragging und		•		r omissior	ı that
5.	I hereby affirm that, if for the Regulations, without any penal law or any law	prejudice to any	other criminal ac	•			
6.	I hereby declare that I had country on account of bein and further affirm that, in liable to be cancelled.	ng found guilty of	abetting or being	g part of a co	onspiracy to pro	omote, rag	ging;
Declare	ed this	_ day of	month o	f	year.		
Signatu	ure of Deponent						
Name:							
VEDIE	ICATION						
	ICATION	official vit are true	a the best of my	, knowlodao	and no nort o	f the efficie	svit io
	d that the contents of this and nothing has been conce			knowledge	and no part of	i the amua	IVIL IS
	d at	(place) or	n this the		_day of	of m	onth,
	year.						
Signatu	ure of Deponent						
Solemr	nly affirmed and signed year after readir	in my presence			_ day of	mon	th of

**OATH COMMISSIONER** 

### **AFFIDAVIT BY PARENT/GUARDIAN**

l,				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 THAPAR							
INSTITUTE OF ENGINEERING & TECHNOLOGY, PATIALA have received a copy of the ANTI-								
ALCO	ALCOHOL/DRUG ABUSE Policy (hereinafter called the "Policy") carefully read and fully understood							
the pr	ovisions contained in	the said Policy.	•					
1)	I have, in particular aware of the penal a case he/she is found or storage of any a lnstitute campus, tra	, perused and ful and administrativ d guilty of the pure alcoholic beverag aining sites and a ely or passively, o	e action that is lict chase, possession ge, controlled su t all INSTITUTE sp	the clause 5 of the Policy and am fully liable to be taken against my ward in on, use, consumption, sale, distribution ubstance, smoking or illegal drug on ponsored student events, conferences conspiracy to promote such activities				
2)	I hereby affirm that liable for punishme	r, if my ward is fo nt according to c	clause 5 of the Po	entioned in clause 2 above, he /she is Policy, without prejudice to any other any penal law or any law for the time				
Declai	ed this	day of	month of	year				
				Deponent				
				Address:				
				Telephone/Mobile No:				
Verifie	ICATION  ed that the contents ovit is false and nothing			st of my knowledge and no part of the ed therein.				
Place: Date:				Deponent				
	nly affirmed and sign	ed in my presend	ce on this the (da	lay) of month, (year) after reading the				

**OATH COMMISSIONER** 

### **AFFIDAVIT BY THE STUDENT**

				admission/registration			o - d/o g been
admitt of the	ed to THA ANTI-ALC	APAR INS OHOL/DF	TITUTE OF EN RUG ABUSE P	IGINEERING & TECHN olicy (hereinafter call n the said Policy.	IOLOGY, PATIA	LA have receiv	ed a copy
1)	of the pe guilty of alcoholic training	nal and a the purc beverag sites and	dministrative hase, posses ge, controlled I at all INSTIT	nd fully understood control action that is liable to sion, use, consumption of substance, smoking the sponsored student of a conspiracy to	o be taken agair on, sale, distrik g or illegal dru lent events, co	nst me in case I oution or stora ug on Institute onferences and	am found ge of any campus, activities
2)	punishm	ent acco	rding to clau	d guilty as mentione se 5 of the Policy, w nst me under any per	rithout prejudio	ce to any othe	r criminal
Declar	ed this		day of	month of	year		-
						Depon	ent
Verifie				avit are true to the be concealed or misstat	•	ledge and no p	art of the
Place: Date:						Depone	ent
	nly affirments of this			resence on this the (	day) of month,	(year) after re	ading the

**OATH COMMISSIONER** 

#### Undertaking from the Student and Guardian

l,Mr./Ms		,Date of	Birth		Roll
No:/TIET	application	number,	seeking	admission	in
Programme:		at TIET, Patiala do h	ereby declare, affi	rm and undertake (	on this
daym	onth	yearthe following:			

- 1. That the information provided by me in the application form is true, correct and nothing has been concealed therein. The documents appended with the check list/application form is/are genuine. I have gone through the eligibility criteria laid down by the TIET, Patiala for the Admission to the above mentioned programme and I hereby confirm that I fulfill the same.
- 2. That I have not used any incorrect, manipulative, forged, illegal, misrepresentation or other inappropriate means/informations/documents/details to secure the admission in the above said mentioned programme. The University shall have the right of cancellation/termination of my admission in case it is found that I have used any of the above mentioned means/informations/documents(s) to secure the admission or given wrong information or facts.
- 3. I shall abide by the admissible rules and regulations of TIET University, Patiala. I acknowledge that the University has the authority of taking disciplinary action on me for non-compliance of the same.
- 4. I understand that as per rules and regulations of the University, I will not be permitted to possess or use any motorised vehicle inside the Institute campus, unless I am permitted to do so by a written prior authorization from the Dean (Students' Affairs).
- 5. In the event of my involvement in any activity outside the campus which is punishable by the law of the land, the Institute shall in no way provide any support to me and will be not be responsible either for my action.
- 6. I also declare that I am not suffering from any serious/contagious ailment including psychology related symptoms.

Signature of Student

I hereby fully endorse the undertaking made by my child/ward.

Signature of Mother/ Father and or Guardian