SANTOSH Deemed to be University



2.1.1 Due Consideration is given to equity and inclusiveness by providing reservation of seats to all categories during admission process

















ADMISSION FORM Affix Self **Course Applied for** Attested Passport ☐ MD/MS size photograph ☐ MBBS BDS B.Sc. MDS ☐ M.Sc. MHA Ph.D. of the candidate Speciality **Personal Details** Name of the Candidate: Surname Surname Gender...... Male Female 🗌 Third Gender Marital Status Nationality Religion Community Date of Birth Age (As on 31st Dec of the admission year) Years Place of Birth State of Domicile Whether the applicant belongs to: (A) SC (B) ST (C) OBC (D) General/UR (E) Others EWS: Yes/No Details Physically Challenged: Yes/No. Details PAN Card No. Aadhar No. NEET Details UG NEET _____ Date of Exam _____ NEET Roll No. Category Rank Category Rank Candidate Mobile No. Phone No. (STD Code): No. Email ID: **Details of Qualifying Examination** Name of the Council, Class/ Board/Council Name & Address of the Year of % of Marks Degree University School/Institution/University obtained Regn. No. & Data 10th 10+2 MBBS/ BDS/Anv other UG Course MD/MS/ MDS/ M.Sc. From Τo Period of Completion CRRI/CRI Name of the Institution Whether hostel accommodation is required: Yes/No,

If yes, please specify - Twin AC......Twin Non AC.....Single Non AC.....Single AC.....





Form No.

Family Details Father's Name (Mr./Shri./Dr.)		
Occupation	Designation	Department
Central Govt./State Govt./Public Sector	/Private Salaried/Business/Pvt. Practice	
Place of Work		
PAN Card No.	Aadhar No	
Mobile No.		
E-mail id	Phone No. (Res.) STD Code:	No
Mother's Name		
Occupation	Designation	Department
Central Govt./State Govt./Public Sector	/Private Salaried/Business/Pvt. Practice.	
Place of Work		
PAN Card No.	Aadhaar No	
Mobile No.		
E-mail id	Phone No. (Res.) STD Code:	No
Occupation	Designation	Department
Central Govt./State Govt./Public Sector	/Private Salaried/Business/Pvt. Practice.	
Place of Work		
PAN Card No.	Aadhaar No.	
Mobile No.		
E-mail id	Phone No. (Res.) STD Code:	No
	/Spouse: Rs.	
(in words)		
Signature of Parent/Guardian/Spouse		Signature of Candidate
Place:		Date:





	CHECK LIST		Form No	
List of Do	cuments to be Attached with the Application			
(a) Docum		Tick	رم	unt
. ,	Marksheet	Yes / No	(۱
	Marksheet Marksheet	Yes / No	()
	Passing Certificate	Yes / No	()
	Passing Certificate	Yes / No	()
	5 / BDS / MD / MS / MDS / MSc Degree Mark Sheets [All years]	Yes / No	()
5. Cond	uct / Character Certificate from the Principal of the School / College last ed.[For Open school students Certificate from the Gazetted Officer].	Yes / No	()
	sfer/ Migration Certificate from the College/ Board/University	Yes / No	()
3. Gap \	/ear Certificate if any [Notarized on Rs.100/- stamp paper]	Yes / No	()
). Interi	nship Completion Certificate	Yes / No	()
0. Degre	ee / Provisional Pass Certificate of the University	Yes / No	()
1. Medio	cal / Dental Council Registration Certificate	Yes / No	()
2. Domi	cile and Caste Certificate issued by the Competent authority	Yes / No	()
3. EWS	Certificate (if applicable)	Yes / No	()
4. Medi	cal Fitness Certificate	Yes / No	()
5. PWD	Certificate issued by Competent Authority	Yes / No	()
b) Annex	ure			
. Last	3Years ITR of Parent / Guardian/ Spouse/Candidate	Yes / No	()
. Self a	attested PAN Card & AADHAAR CARD copy of the candidate	Yes / No	()
. Self a	attested PAN card copy (ies) of Father/Spouse (if applicable)	Yes / No	()
. Post	Dated Cheques (PDC Cheques of whole course years)	Yes / No	()
. Affix	Family Photograph	Yes / No	()
Othe	rs, If any, specify:	Yes / No	()
(i)	NEET Admit Card	Yes / No	()
(ii)	NEET Provisional Allotment Letter	Yes / No	()
(iii)	NEET Result (Score Card)	Yes / No	()
		Total		
「otal Nun	nber of Documents enclosed (in Nos./Words)			
_	sure to avoid misplacement, all documents / certificates must be indexed din the Check List and serially numbered and tagged or stapled with the Admi		nged in the	ordei
Signature	of Parent/Guardian/Spouse	Signature of Candidat	e	
Place:		Date:		



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Form	No.								

TERMS & CONDITIONS

- 1. Admission form is to be filled neatly and in bold letters by the candidate in his/her own handwriting.
- 2. No admission will be considered as complete unless supplemented by all documents as specified in the check list.
- 3. A candidate giving information in this Admission Form if found incorrect/false after admission; his/her admission is liable for cancellation and will be expelled from the Institution, duly forfeiting the fee paid.
- 4. Fees once paid will be refunded as per Institution/ counseling refund rules.
- 5. Refund rules as per UGC latest notification, shall be applicable for the one who seeks discontinuation of the course in the interim.
- 6. The Tuition / Course Fee paid is only for the duration of each Year of study. Post dated Cheques for the entire course duration must be submitted at the time of admission with undertaking of Cheque clearance and scheduled presentation as attached in form.
- 7. Cheques in lieu of tuition fee shall be presented on the prescribed day of due month as per fee schedule of your course.
- 8. In case the year of study is extended due to failing in the University Exams or any other reasons the proportionate fee as applicable, is payable for each extended year / course of study.
- 9. Security Deposit, if paid any, is refundable only after successful completion of the Course and Internship if any, with submission of complete N.O.C form. The mode of repayment will be by RTGS / NEFT / IMPS payable in the month of August only.
- 10. (a) As per the norms of the Medical/Dental Council of India the internship is a part and parcel of the curriculum of the MBBS/BDS course and the same has to be done/completed in the parent institution only. Accordingly he/she has to do the internship in the Santosh Medical/Dental College & Hospital only.
 - (b) In case if any student wants to do the Internship outside this Institution he/she has to pay the prescribed Migration Fee for the issue of NOC thereof.
- 11. Any disputes / differences / controversies of whatever nature shall be subject to the jurisdiction of courts at Ghaziabad, U.P / Delhi only.

I have read and understood all the above terms and conditions and I completely agree to adhere with the same without any reservation or demure.

Signature of Candidate	Signature of Parent/Guardian/Spouse
Place: Ghaziabad	Date:



Place: Ghaziabad



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		+91 120 49555507 007 70
		Form No.
	DECLARATION TO BE SIGNED BY THE STUDENT	
	S/o	residing at
	do hereby declare that the info	ormation given by me in
this A	s Admission Form is true to the best of my knowledge and belief and I would be held responsible if a	
incorre	orrect. I solemnly declare that-	
1.	I have not been debarred from appearing at any examination held by any University / Board / School	or College/ council.
2.	I have not been involved in any mode of ragging activity or charged for involving in any type of raprevious course of study at school / college Level.	gging activity during my
3.	I understand that no other document, other than those attached to the Admission form will be ent of any claims / concessions etc. in connection with my admission.	ertained for the purpose
4.	I hereby agree to all the terms and conditions of admission and also in conformity with any regulat enforced from time to time by the Council, State or Central Governments, Deemed to be University the intuition.	
5.	I declare that I have never been found convicted by any court and there is no legal case of any type if any I have duly provided details. I have never been legally prosecuted ever.	is registered against me,
6.	I/We undertake that I (student) shall not indulge in any illegal/ unethical/ unprincipled/ immoral/corwhich may cause loss of property, reputation and goodwill of SANTOSH DEEMED TO BE UNIVERSITY that I/We shall compensate for/indemnify against any loss/damage caused to SANTOSH DEEMED T	Y. I/We further undertake
7.	I would fully abide with National / International cyber laws and would never devalue/insult Institut by any of my direct or indirect cyber activity at any digital platform.	ion or its staff reputation
8.	I fully understand that the Dean / Principal of the college will have full liberty to suspend/expericollege for any infringement of the Rules of Code of Conduct and Discipline, Regulations enforced to be University from time to time.	
9.	I, hereby declare that, both I will not indulge in, nor tolerate ragging, in any form, even in, words or in give an undertaking in the prescribed format for the same.	ntentions, and I accept to
10.	I, hereby declare that, I shall be solely responsible for my involvement in any kind of undesirable outside the campus, and shall be liable for punishment as per the law of the land. I, further under shall in no way provide any support to me and will not be held responsible for my any such action.	
11.	I, also declare that, I am not suffering from any serious/contagious ailment and/or any psychiatric / I	osychological disorder.
12.	I, hereby undertake to inform the institute, about any changes in information submitted by me, in any other documents, including change in addresses, phone nos. and email from time-to-time.	the Application Form and
Signat	nature of Candidate Signature of Parer	nt/Guardian/Spouse

Date:





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_									
Form	No.								

DECLARATIONS/UNDERTAKINGS BY THE CANDIDATE & PARENT/SPOUSE/ GUARDIAN

- 1. I/We hereby declare that the information furnished on this Admission form etc. is correct to the best of my Knowledge and belief.
- 2. I am taking admission in SANTOSH DEEMED TO BE UNIVERSITY with the consent of my Father/ Mother/ Legal Guardian and after being satisfied in all respects.
- 3. I/We undertake that the information/ details furnished/ given by me/us are correct and if any discrepancy is found in the said details/information, at any stage of my association with SANTOSH DEEMED TO BE UNIVERSITY may take any legal action against me/us which SANTOSH DEEMED TO BE UNIVERSITY may deem fit including but not limited to my (student) expulsion from the institute and I/We shall not be entitled for any refund of fees/ claim/ compensation/ damages etc.
- 4. I/We undertake that I/We shall furnish/submit/ complete the remaining required documents and formalities by at least two weeks prior to commencement of course program. However, if I fail to do so, SANTOSH DEEMED TO BE UNIVERSITY may not allow me to attend the classes, unless otherwise allowed by SANTOSH DEEMED TO BE UNIVERSITY in writing. I/We further undertake that I/We shall not claim any refund of fees/cost of study material etc. already paid on ground of inability to furnish/complete documents/formalities.
- 5. I undertake that if I leave the institute midway before completing the full course for any reason whatsoever, including but not limited to transfer of my Father/Mother/Legal Guardian / III health of myself or any other member of the family or my admission in any institute/ course/ college etc. or my studentship is cancelled because of misconduct etc. I or my Father/ Mother/Legal Guardian shall not be entitled for refund of fees.
- 6. In addition to the above, I understand without any ambiguity that the fee once paid is not refundable at all, Whatever the reasons be, nor is it adjustable towards any other existing courses at SANTOSH DEEMED TO BE UNIVERSITY or any yet to be Launched nor towards the fee of any other existing or prospective student.
- 7. I undertake that I shall abide by the rules & regulations of SANTOSH DEEMED TO BE UNIVERSITY or SANTOSH DEEMED TO BE UNIVERSITY's associated college. I undertake that in case of any dispute relating to breach/violation of any of the Rules & Regulations of SANTOSH DEEMED TO BE UNIVERSITY or SANTOSH DEEMED TO BE UNIVERSITY's associated college, the decision of the Management of SANTOSH DEEMED TO BE UNIVERSITY shall be final and binding in all circumstances and situations, whatsoever.
- 8. It is understood that this admission is valid only for the course and the duration for which I am taking admission and I/We (the student and the Parents/Legal Guardian) shall not claim/request for admission to and adjusting the fees to any other course or duration.
- 9. I/We have fully satisfied ourselves with regards to quality and excellence of teaching at SANTOSH DEEMED TO BE UNIVERSITY from all available information/ sources and have decided to study only at SANTOSH DEEMED TO BE UNIVERSITY.I/We wish to pay the entire as per explained and agreed fees schedule _______(the same is signed by me & the student and is attached with this Admission form) at our own sweet will and convenience without any pressure/ coercion from any one.

Student's Signature	Signature of Father/ Mother/Legal /Guardian's
Name:	Name:
Date:	Date:
Place:	Place:





Place:

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Place:

DECLARATION BY THE PARENT / GUARD	Form No
declare that the particulars furnished by my son / daughter / spouse / ward in t knowledge.	
undertake to abide myself to all the terms and conditions of this admission and ward such fees, charges etc., which the institution may levy from time to time on on my part and / or on the part of my son / daughter / spouse/ ward, the Dean / pring son / daughter / spouse/ ward, the Dean / pring son / daughter / spouse/ ward as deem fit, including not allowing / permitting h	or before the due date and in the event of failure ncipal of the College may take such action against
am fully aware that the course fees paid is only for the prescribed period and if resession and / or not passing the subjects in the first attempt or within the prorescribed fee for each extended period of study till he/she completes the course of	rescribed period, I hereby undertake to pay the
further undertake to pay penalty prescribed for any late payment of fee / dues et	С.
Student's Signature	Signature of Father/ Mother/Legal /Guardian's
Name:	Name:

IMPORTANT INFORMATION FOR STUDENTS (and their parents/legal guardians)

- a. Kindly go through the SANTOSH DEEMED TO BE UNIVERSITY leaflet/Brochure/Information Booklet, word of advice, selection letter & website thoroughly. Other than these no other verbal assurance of any kind is given by SANTOSH DEEMED TO BE UNIVERSITY.
- b. Once a course /session starts SANTOSH DEEMED TO BE UNIVERSITY does not admit any students. Therefore, any vacancy created by a student leaving cannot be filled up. Since SANTOSH DEEMED TO BE UNIVERSITY has to source infrastructure, faculty etc. in advance, loss of fees of students leaving after taking admission will compel the institute to enhance fees for next batch of students which is unfair to them. Therefore, students/parents must clearly understand this important aspect and take admission only if they are fully satisfied.
- c. Any change in government counseling rules, regulations, policies pertaining to courses. In such eventuality, SANTOSH DEEMED TO BE UNIVERSITY shall not be held responsible in any manner whatsoever. However, SANTOSH DEEMED TO BE UNIVERSITY shall take all necessary steps to protect the interest of students.





	Form No.
UNDERTAKING BY THE CANDIDATE & PARENT / SPOUSE / GUARD	DIAN ABOUT THE CODE OF CONDUCT
I,the candidate who has applied for	Course and
I, Fath	er / Spouse / Guardian of the above named
candidate duly affirm and undertake to the college that the above named candidate	e shall comply with the following code of conduct
acts. deeds while pursuing the above Course:-	
(a) shall at all time maintain good behavior and moral code of conduct and staff of the college / Deemed to be University.	with the teachers, the fellow students, hostlers
(b) shall not indulge in any type of ragging as the same is an offense and	subject to receive appropriate punishments.
(c) shall not in any manner disturb the discipline & harmony of the Colleg	ge & Hostel.
(d) shall pay all the fees, dues & charges of the college as and when dem	anded within the stipulated time.
(e) shall not indulge in violent acts and case damage to the college prorections of the cost but also dismissal from college.	perties and such acts shall not only be liable for
We the above named do hereby fully agree without excuse or demure that in commits default or violation in any manner of any of the above undertakings, term of College / Deemed to be University / Council etc., the college authorities shall have deed and things with the Police authorities, Deemed to be University authorities, with any other appropriate authorities, requesting them to take suitable action.	ns & conditions of admission, rules & regulations ve the right to lodge complaint against such acts,
At the same time the college shall be entitled to initiate immediate strict action again rustication or any other action permissible within the law, terms and conditions college.	
We further undertake that we shall not have any right to raise or voice any objection any kind of strike/grouping/making slogans within or outside the college/hospital parts of the colle	
We have read, understood and also explained all the above terms and conditions, vat all times.	we hereby affirm to accept and honour the same
I/We, the parent/ guardian and/or the student, hereby severally and jointly de understood all the clauses contained in this admission form, Annexure and Declar reservation or ambiguity.	
I have read the above carefully and have understood it clearly. I/We have also UNIVERSITY Brochure carefully and have understood it clearly. I have kept a photoincluding this declaration and all Annexures for my future reference and timely compared to the compared to th	otocopy of all the pages of this Admission form
Student's Signature	Signature of Father/ Mother/Legal /Guardian's
Name:	Name:
Date:	Date:
Place:	Place:



Signature of the Student

Place: Ghaziabad



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SANTOSA	Impactul Hyears	1, Santosh Nagar, Ghaziabad (Delhi NCR) www.santosh.ac.in admissioncell@santosh.ac.in +91 120 4933350 / 60 / 70
		Form No
	ree kert	אוט אטנפט
I, Mr./Ms/Dr.		solemnly declare that I Son /
Daughter of	has g	got the admission toCourse.
I, Mr./Ms/ Dr.	the F	Parent / Guardian / Spouse of the above mentioned candidate
hereby joint	ly undertake that we have secured the admission	only after having been clearly explained about the "Fee Refund
Rules" of the	e university prescribing from time-to-time.	
We affirm th	nat this undertaking is being signed by us on our o	wn free will and with full consent and without any compulsion or
Signature of	the Student	Signature of the Parent/Guardian/Spouse
Place: Ghazi	abad	
Date:		
	UNDERTAKING FOR	ACADEMIC ACTIVITIES
I, Mr./Ms/Dr.		solemnly declare that I Son / Daughter
of	has got the admission	on in
I, Mr.	/Ms/Dr	the parent / Guardian / Spouse of the above mentioned
candidate he	ereby jointly undertake that we have secured the ad	mission for this course on the understanding that the student shall
		nly if he/she fulfill the following basic eligibility criteria
1.	Minimum of 80% Attendance	and Sugar
2. 3.	Minimum of 50% Marks in the Terminal & Pre Profe Good Conduct and Character of the Student	SOSIONIAI CXQIIIO
4.	Clearance of all pending due fees from Account de	partment
	ffirm that this affidavit is being signed by us on our fully agree to abide the above conditions of my son	own free will and with full consent and without any compulsion or / daughter / ward declaration.
Signature of	the Student	Signature of the Parent/Guardian/Spouse

Date:





UNDERTAKING FOR NOT AVAILING ADMISSIO	Form No
	solemnly declare that I have got the
	Course and
	the Parent Spouse / Guardian of the
above mentioned candidate hereby jointly undertake that:	•
We have not secured any admission in any other institution / Deen	ned to be University for the same academic session and if in future
if it is found to be incorrect/false my admission is liable to be cance	elled without any notice and we shall also be liable for forfeiture of
total fee paid.	
This undertaking is being signed by us on our own free will and full	consent and without any compulsion or coercion.
Signature of the Student	Signature of Parent/Guardian/Spouse
Place: Ghaziabad	Date:
Witness:	
WithC33.	
1.	
2.	
UNDERTAKING FOR S	ECURING ADMISSION
I, Mr/Ms/Mrs./Dr.	solemnly declare that I have got the
admission in the	
Mr./Mrs./ Dr.	the Parent Spouse / Guardian of the
above mentioned candidate hereby jointly undertake that we have	ve secured the admission for this course in normal process and we
have not made any payment to any person as "BRIBE, BROKERAGE	GE OR ANY FORM OF PAYMENT" to secure this admission and if it
is found in future that the admission has been secured by bribing	or through any unfair means the admission would be liable to be
cancelled and no fee would be refunded to us.	
Signature of Parent/Guardian/Spouse	Signature of Candidate
Place: Ghaziabad	Date:





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Form No	
---------	--

	FOR POST DATED CHEQUE(S) / NACH MANDATE
I,	, D/o, W/o. H/osolemnly
declare that I have not paid any excess fees or donation or ca	pitation to the college except the Prescribed Tuition fees and other
fees at the time of admission to.	course for the academic session 2020
does not attend the program and thus the seat given to him/other candidate and a vacancy created in the batch due to with to the same cannot be filled in any case, therefore I understand losses in case of non-payment of remaining fee of the installand	e Program to which he/she has been admitted at any point of time or her is rendered vacant, the same will not/cannot be filled up by any drawal of a student after the starting of classes or up to 10 days prior d that SANTOSH DEEMED TO BE UNIVERSITY shall suffer irreparable liment plan, hence it will be unethical not to honor the Post Dated an and have submitted the Post Dated Cheque(s)/NACH Mandate as
I further agree to get above Post Dated Cheque(s) / NACH Man SANTOSH DEEMED TO BE UNIVERSITY, irrespective of any reas	date cleared, even if, my son/daughter/ward discontinues studies at ons.
I agree that, I will make arrangement, for below started Possufficient funds on or before the due date for the same.	t Dated Cheque (s) /NACH Mandate, to get honored, and will keep
UNIVERSITY. The necessary Admission -forms, including this	I health. I have satisfied myself about SANTOSH DEEMED TO BE form was received by me several days before the actual date of g admission at SANTOSH DEEMED TO BE UNIVERSITY. I have taken and I am satisfied.
Student's Signature	Signature of Father/ Mother/Legal /Guardian's
Name:	
Admission Number (for office use only):	Name:
Date: Address:	
I have retained photocopy of this document for my reference be	efore submitting it at SANTOSH DEEMED TO BE UNIVERSITY.
Father/Mother/Legal Guardian's Signature	

Place:



Place: Ghaziabad



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		3/02 / 390 ★★		www.santosn.ac.i	+91 120 4933350 / 60 / 70
					Form No.
			e Clearance and Sche		71 1
					availed
					Batch
with Reg	istration No			to securing	my admission, we have
deposite		,	ards my remaining period		
			Payable at par Cheque Mandatory for Rs. 2,0		,
S.No.	Cheque No.	Dated	Issuing Bank	Fee Amount	Total Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
about the	e Negotiable Instrum	ents Act, 1881 is applica	ble for the cases of dish	onour of cheque. We req	are that we are fully aware uest you to kindly present f cheque, the College is at
	take action as per rul		· ·		
	_	_			y System (PPS) for Cheque
					stems Act,2007 (Act 51 of
∠UU1). H	encerorth we have in	rormed to the bankers to	honour the cheques as pe	ei KBI Mañdate.	
Signatur	e of Parent/Guardian	/Spouse		Signature of Can	didate

Date:





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CONSEQUENCES OF DISHONOUR OF POST DATED CHEQUE(S) /NACH MANDATE

I understand that non-clearance of any of the Post Dated Cheque(s) / NACH Mandate, submitted for payment of fees (on installment basis) as mentioned in the Enrollment-Form and annexure "A" is punishable under Sec. 138 of the Negotiable Instrument Act. I understand that SANTOSH DEEMED TO BE UNIVERSITY shall be entitled to proceed and initiate appropriate legal action against me, to recover the amount of the Post Dated Cheque(s) /NACH Mandate, along with the legal expenses and out of pocket expenses incurred by SANTOSH DEEMED TO BE UNIVERSITY.

In case any of my Post Dated Cheque(s) /NACH Mandate bounces for any reason whatsoever, I undertake to submit a DD/Pay-Order in favour of "SANTOSH DEEMED TO BE UNIVERSITY LTD." payable at Ghaziabad, within two days of the bouncing of the Cheque(s) at my bank, together with Rs. 1000/- (Rupees One Thousand only) along with late payment penalty fee (as per institution policy) from the due date of payment of instalment after which my son /daughter/ward shall be debarred from classes without any further notice and shall I have no claim for refund of fees or any support in studies besides Legal action inter alia action under Section 138 of the Negotiable Instrument Act may be initiated against me/us.

Student's Signature	Signature of Father/ Mother/Legal /Guardian's
Name:	{Who has issued the cheque(s)}
Admission Number (for office use only):	
Date: Address:	
have retained photocopy of this document for my reference before submitting it a	at SANTOSH DEEMED TO BE UNIVERSITY.
Father/Mother/Legal Guardian's Signature	
Date: Place:	





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				Form No.
	ANTI-RAGGING AF	FFIDAVIT BY THE ST	UDENT	
I	S/o D/o Mr.	/ Mrs. / Ms		have received a
сорус	of the Regulations 2009 of the University Grants Comn	mission [NO.F.1-15/2009	9[ARC] dated 29.06.2016-G	ist] Medical Council
of Ind	dia, Dental Council of India, Director General Medical	Education & Training [I	DGME], Government of Utta	ar Pradesh and the
direct	tions of the Honorable Supreme Court of India regardi	ng Curbing the Menace	of Ragging carefully read an	nd fully understood
the pr	rovisions contained in the said Regulations.			
1)	I hereby solemnly aver and undertake that			
	a) I will not indulge in any behaviour or act that m	nay be constituted as rag	gging as per UGC regulations	
	b) I will not participate in or abet or propagate th UGC regulations.	rough any act of commis	sion or omission that may be	e constituted as per
2)	I hereby affirm that, if found guilty of ragging, I a prejudice to any other criminal action that may be torce.	•	-	_
3)	I hereby declare that I have not been expelled or debeing found guilty of, abetting or being part of a declaration is found to be untrue, I am aware that my	conspiracy to promote,	, ragging; and further affirn	3
4)	Along with the above mentioned points I do hereby d	eclare that		
	a) I will obey the code of conduct of the institute the institution campus.	e and do not indulge in ai	ny kind of in-disciplined activ	rity while in and off
	b) I will be solely responsible for any kind of accid	dent/mishap caused on a	account of the above mention	ned clause (4.a).
Declai	red thisday of month ofye	ear.		
		Signat	ture of Deponent	
		Name		
	W	CDICICATION		
		ERIFICATION		
	ed that the contents of this affidavit are true to the be concealed or misstated therein	st of my knowledge and	no part of the affidavit is fal	se and nothing has
Verifi	ed at(place) on this the	(day) of	(month),	(year)
		Signat	ture of Deponent	
	nnly affirmed and signed in my presence on this the reading the contents of this affidavit	(day) of	(month),	<u>(</u> year)

OATH COMMISSIONER



after reading the contents of this affidavit



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		Form	n No
		ANTI-RAGGING AFFIDAVIT BY PARENT/GUARDIAN	
I, Mr./M	1rs./Ms	sfather/mother/guardian of	(Name
of the s	studer	nt), having been admitted to	<u>(</u> n a m e
of the	institu	ution), have received a copy of the Regulations 2009 of the University Grants Commission [NO.F.1-	15/2009[ARC]
dated	29.06	5.2016-Gist] Medical Council of India, Dental Council of India, Director General Medical Education & Tra	aining [DGME],
Goverr	nment	of Uttar Pradesh and the directions of the Honorable Supreme Court of India regarding Curbing the Mena	ace of Ragging
carefu	lly rea	d and fully understood the provisions contained in the said Regulations.	
1)	There	eby solemnly aver and undertake that	
	a)	My ward will not indulge in any behaviour or act that may be constituted as ragging as per UGC Regulation	ons.
	b) const	My ward will not participate in or abet or propagate through any act of commission or omission tituted as ragging as per UGC Regulations.	that may be
2)		eby affirm that, if found guilty of ragging, my ward is liable for punishment according to UGC Regula dice to any other criminal action that may be taken against my ward under any penal law or any law for th s.	
3)	of be	eby declare that my ward has not been expelled or debarred from admission in any institution in the coun eing found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm the aration is found to be untrue, the admission of my ward is liable to be cancelled.	-
4)	Along	g with the above mentioned points I do hereby declare that	
	a) and o	My ward will obey the code of conduct of the institute and do not indulge in any kind of in-disciplined a off the institution campus.	ctivity while in
	b) (4.a).	My ward will be solely responsible for any kind of accident/mishap caused on account of the above me	ntioned clause
Declare	ed this	sday of month ofyear.	
		Signature of Deponent	
		Name	
		VERIFICATION	
		t the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false an lled or misstated therein	nd nothing has
Verifie	ed at	(place) on this the (day) of (month),	(year)

OATH COMMISSIONER

Signature of Deponent

Solemnly affirmed and signed in my presence on this the.....(year)

Form	No.							

COURSE DISCONTINUATION BOND

(Undertaking / Bond for UG & PG Medical and Dental Seats) (To be submitted on a Rs. 200 stamp paper purchased in Uttar Pradesh)

I, Dr / Mr / Ms	(Nan	(Name of the Candidate), aged about				
S/D o	(Na	(Name of the Parents), resident of (permanent / present address of				
Parent) do hereby swear on oat	h as follows:					
I, have been selected to the 1 st y	/ear	Course	Branch at Santosh	Medical College &		
Hospital / Santosh Dental Col	lege & Hospital, Ghaziabad, NC	CR Delhi, A constituent	unit of Santosh Deemed	to be University,		
Ghaziabad, NCR Delhi under Sed	ction 3 of the UGC Act 1956, thre	ough the Common Couns	selling conducted by the Di	rectorate General		
of Health Services (DGHS), Gove	ernment of India (GOI), New Delh	i through NEET Rank No	(All India	Rank).		
l, affirm and state that on my ov	vn will and with concurrence of r	my parents/guardian, too	ok admission to the	Course		
B	ranch at Santosh Medical Colle	ge & Hospital / Santosh	Dental College & Hospita	l, Ghaziabad, NCR		
Delhi as per the DGHS allotmen	t with NEET Roll No.	Dated				
l, affirm and state in considerat	ion of admission to 1 st year		Course	Branch, I		
shall.complete.the	Course	Branch and acco	ordingly undertake to pay	all the tuition and		
other fees as demanded by San	tosh Deemed to be University, C	ihaziabad, NCR Delhi.				
In the event of my discontinuat	ion ofC	ourse	Branch due to any reaso	n; I along with my		
parent / guardian hereby under	take to pay the balance tuition	fees and other fees to Sa	antosh Deemed to be Unive	ersity, Ghaziabad,		
NCR Delhi payable for the entir	e course without any demur / ob	ojection. I also understan	nd that the full & final clear	ance / NOC will be		
given to me only after payment	of all outstanding / balance fee					
What is stated above is	true and correct. I along with m	y parent/guardian do he	ereby undertake to act acco	ordingly. This, the		
day of / 202 at	, Uttar Pradesh state	е.				
Signature of	Signature of	Signature of	Signature of			
Candidate	Parent/Guardian/Spouse	Witness (1)	Witness (2)			
Name:	Name:					
Mobile No.:	Mobile No.:					
Email ID:	Email ID:	. Email ID:	Email ID:			



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Qualified ECFMG Exams



Working in reputed Research Institutes



Awarded Young
Scientist Award of ICMR



Working as Sr. Residents in colleges and hospitals



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Holding high-ranking Administrative Positions



Serving faculties in Reputed
National and Global Institutions

CROSSINGS

Chinyana

LAL KUAN





SANTOSH Deemed to be University