## **ANNEXURE II**

## AFFIDAVIT BY PARENT/GUARDIAN

I, Mr./Mrs./Ms.	(full	name	of
parent/guardian) father/mother/guardian of , (full name of student	with Un	iversity	Roll
Number), having been admitted to(name of the institution), have rece	ived a cop	y of the	UGC
Regulations on Curbing the Menace of Ragging in Higher Education	al Instit	utions, 2	2009,
(hereinafter called the "Regulations"), carefully read and fully understood the	ie provisi	ons conta	ained
in the said Regulations.			

- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
- a) My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
- b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared thisday of month ofyear.	
	Signature of deponent Name: Address: Telephone/ Mobile No.:
<b>VERIFICATION</b> Verified that the contents of this affidavit are true to the bes	t of my knowledge and no part of the

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at (place) on this the (day) of (month), (year).

Signature of deponent

Solemnly affirmed and signed in my presence on this the (day) of (month), (year) after reading the contents of this affidavit.