

PROFORMA – 6

(To be filled by NRI/OCI/PIO visiting India and having a valid certificate/ID issued by Ministry of External Affairs/Indian Embassy in the concerned Country)

The following is to be printed / typed / photocopied and then duly filled -- on Rs.50/- Non Judicial Indian Stamp paper and duly notarized

NRI Undertaking

I, _____ , solemnly affirm that
I am father / mother / guardian (relation with ward _____)
of Mr. / Ms. _____ .

I am a bonafide Non Resident Indian (citizen) / OCI / PIO of _____
_____ (country) for _____ years.

I have looked after my son / daughter / ward _____
(name of candidate) for _____ years.

I undertake to be responsible for his/her conduct and for maintenance of discipline and shall pay regularly all his / her expenses including tuition fees during his / her stay at the institution.

I hereby solemnly affirm that the statement and information furnished by my son / daughter / ward _____ (name of candidate) in the application form and as also in the enclosed enclosures hitherto are true.

I realize that if any information furnished therein is found to be untrue in material particulars, he/she is liable to criminal prosecution and may be removed from the institution.

Place:

Signature of (NRI/ OCI /PIO)
Father/Mother/Guardian

Date:

Address: _____

PROFORMA – 7

(To be filled by NRI/OCI/PIO residing outside India)

The following is to be printed / typed / photocopied and then duly filled --
on Foreign Country Stamp paper / equivalent paper of the NRI country and duly notarized
by notary of foreign country.

NRI Undertaking

I, _____, solemnly affirm that
I am father / mother / guardian (relation with ward _____)
of Mr. / Ms. _____ .

I am a bonafide Non Resident Indian (citizen) / OCI / PIO of _____
_____ (country) for _____ years.

I have looked after my son / daughter / ward _____
(name of candidate) for _____ years.

I undertake to be responsible for his/her conduct and for maintenance of discipline
and shall pay regularly all his / her expenses including tuition fees during his / her
stay at the institution.

I hereby solemnly affirm that the statement and information furnished by my son /
daughter / ward _____ (name of candidate) in the
application form and as also in the enclosed enclosures hitherto are true.

I realize that if any information furnished therein is found to be untrue in material
particulars, he/she is liable to criminal prosecution and may be removed from the
institution.

Place:

Signature of (NRI/ OCI /PIO)
Father/Mother/Guardian

Date:

Address: _____

PROFORMA – 8

UNDERTAKING OF PARENT FOR FAMILY RELATIONSHIP

(To be filled by parents / guardians of the candidates who are submitting Proforma 6 or Proforma 7)

The following should be notarized / registered in Rs. 50/- Indian Stamp paper

I, _____ age _____ years, residing at _____
occupation _____ do hereby solemnly state on affirmation as under:-

Mr./Mrs./Ms. _____ (name of sponsor) is my
_____ (relation) and his/her personal details are given below:

1	Full Name of Sponsor	
2	Age	
3	Present Address	
4	Occupation / Designation	
5	Name of the Company / Organization	
6	Office Address	

For that I have written this affidavit for showing my family tree/chart, the details of which are as below

Family Tree ↓

It is submitted that the information stated above is correct to the best of my knowledge and also the documents, information and evidence submitted by me in this respect. In case, the information given is found incorrect and/or in case any illegality is caused on granting this admission and the same is brought to the notice of the Admission Board at latter point of time, I will be fully responsible for any adverse effect of the same. It will be open for the competent Authority to take appropriate action as deemed fit in this regard.

Hence the information stated above is correct to the best of my knowledge and belief.

Signature and Name of Parents / Guardian

Dated this _____ day of _____ 2019

Before me

SERVICE BOND / UNDERTAKING FOR ALL INDIA QUOTA & STATE QUOTA
UNDER GRADUATE MEDICAL STUDENTS

STAMP PAPER VALUE
NOT LESS THAN Rs. 500/-

BOND / UNDERTAKING

WE,.....(Name of Student) age.....
D/o / S/o resident at
.....
.....
at present MBBS student in
(here in after called 'the obligor') and (1) Shri.
designation..... (here after called surety) do hereby
jointly and severally bind ourselves and our respective heirs in execution and administration to
pay the Govt. of Rajasthan (herein after called the Government) on demand the sum of
Rs.5,00,000/- (Rupees Five lacs only) together with interest thereon from the date of demand
at Govt. rates for the time being in force on Government loans, AND TOGETHER with all costs
between attorney and client and all charges and expenses that shall or may have been incurred by
the Government.

That in consideration of the Government of Rajasthan, selecting vide Allotment letter /
order no. Date..... the MBBS course in during the academic
year, the MBBS student and his surety covenant with the Government as follows: -

- 1- Candidates who are selecting Government seats for the MBBS course shall not resign the course before the completion;
- 2- Candidates who are selecting Government seats for the MBBS course shall serve the Government for a minimum period of two years after completion of the course, if Government so desires;
- 3- That in case the MBBS students, who fails to fulfill the above conditions, the surety of the MBBS students shall be jointly and separately liable for penalty of Rs.5,00,000/- as per this Bond / Undertaking.

In witness whereof the Obligor and the surety above mentioned have here unto set their hands this day and the year first above written.

Signature of the MBBS student

Witness:-

Signature, Name & Address of the Surety

- 1.
- 2.

PROFORMA – 10

(To be filled by all candidates who have been allotted a seat)

Undertaking

I _____, age _____ years,
S/o,D/o _____ hereby undertake that:

1. I have got allotment for admission on MBBS/BDS course in the college
_____.
2. For admission, I have deposited my documents in original, as required.
3. All the documents are in original and are not forged/photo copy/printed copy.
4. If any document is not found original or is found forged / photocopy / printed copy, I will be responsible for cancellation of my admission and other action as may be taken by the appropriate authority.

Signature of the candidate

Name: _____

Application no.: _____

Signature of the Father / Mother /Guardian

(Note: If the student is below the age of 18, this undertaking shall also be signed by the father/mother/guardian of the candidate).