



# QUEST FOR EXCELLENCE

## Academic Qualifications:

Level	Board/University	Aggr.%	Division	Year	Subjects
10 <sup>th</sup> Std.					
12 <sup>th</sup> Std.					
ANM					
GNM					
Internship Completion Certificate					
Graduation					
Post Graduation					
Others					

- Work Experience, if any (enclose certificate)
- Candidates are required to fill the academic qualifications as per their applicability.
- Candidates employed need to furnish "No Objection Certificate" from their employer.

**Above mentioned information is complete and true to the best of my knowledge and belief. I undertake to abide by all the rules and regulations of the University in force from time to time.**

(Signature of the Candidate)

Date: .....

## Check List for Enclosures

- |  |                          |   |                          |
|--|--------------------------|---|--------------------------|
| (i) Copy of High School Marksheet as proof of Date of Birth            | <input type="checkbox"/> | (xiv) B.Sc. (N) Marksheets  | <input type="checkbox"/> |
| (ii) Copy of High School Certificate                                   | <input type="checkbox"/> | (xv) B.Sc. (N) Degree   | <input type="checkbox"/> |
| (iii) Copy of Marksheet of Intermediate/12 <sup>th</sup> or Equivalent | <input type="checkbox"/> | (xvi) Post Basic B.Sc. (N) Marksheets   | <input type="checkbox"/> |
| (iv) Copy of Intermediate/12 <sup>th</sup> Certificate                 | <input type="checkbox"/> | (xvii) Post Basic B.Sc. (N) Degree  | <input type="checkbox"/> |
| (v) Duly completed undertakings  | <input type="checkbox"/> | (xviii) RN & RM / RANM State Nursing Council  | <input type="checkbox"/> |
| (vi) Copy of Marksheets of Graduation (if applicable)                  | <input type="checkbox"/> | (xix) Internship Completion Certificate   | <input type="checkbox"/> |
| (vii) Copy of MAT/CAT/CMAT Score Card (for MBA only)                   | <input type="checkbox"/> | (xx) Copy of Domicile Certificate (for Uttarakhand Candidates only)   | <input type="checkbox"/> |
| (viii) Copy of GPAT Score Card (for M.Pharm. only)                     | <input type="checkbox"/> | (xxi) Copy of Cast Certificate for SC/ST/OBC Candidates only  | <input type="checkbox"/> |
| (ix) Valid Score Card of entrance exam (as applicable)                 | <input type="checkbox"/> | (xxii) Copy of Proof of Residential Address<br>(Ration Card / Electricity Bill / Telephone Bill / Aadhar Card etc.) | <input type="checkbox"/> |
| (x) ANM Marksheets   | <input type="checkbox"/> | (xxiii) Affidavit (In case of Gap year)   | <input type="checkbox"/> |
| (xi) ANM Certificate   | <input type="checkbox"/> | (xxiv) Work Experience  | <input type="checkbox"/> |
| (xii) GNM Marksheets   | <input type="checkbox"/> | (xxv) Transfer/Migration Certificate  | <input type="checkbox"/> |
| (xiii) GNM Certificate   | <input type="checkbox"/> |   |                          |

(Signature of the University Official)

Date: .....

Place: .....

**Undertaking by Parents**

I ..... F/o, M/o, G/o ..... pursuing course

..... of ..... Semester / year, hereby affirm and state as under:

1. The documents and other information submitted by my ward to the University are true to the best of my knowledge and belief. In the event of any false information or document, admission of my ward shall be liable to get cancelled and fee deposited will be forfeited.
2. I am aware that university has policy of "ZERO TOLERANCE TO RAGGING". In case my ward is found involved in any form of **RAGGING**, he/she shall be liable for punishment that may even result into expulsion/rustication from the University.
3. That I have obtained the brochure containing the rules and regulations of the University and have read them thoroughly. I undertake and understand that failure of my ward to abide by any of rules and regulations shall make him/her liable for disciplinary action, including rustication by the University authorities. I understand that the decision taken by the University authorities in this regard shall be final for me and my ward.
4. I undertake and bind myself to pay on behalf of my son/daughter/ward such fees, charges etc. which the University may levy from time to time by due date and in the event of failure on my part and/or of my ward, the University authorities may take such action against my ward as he/she may deem fit.
5. That my ward shall not indulge in any political activities and influence the University by any pressure from outside, which is against the norms of the University.
6. I am aware that as per the University norms 75% attendance of my ward in academics is compulsory for him/her to appear in Internal as well as External examination.
7. That my ward will not indulge in smoking, consumption of pan masala, gutkha, drugs, narcotics and alcoholic beverage and **will not keep any weapon with him/her**. If found guilty, he/she shall be strictly dealt with disciplinary action by the University authorities.
8. The address and telephone numbers given by me are correct and in case of any change, I will inform the University immediately. In case, any of the contact number or other particulars submitted by me are found to be incorrect, my ward shall be liable for disciplinary action by the University.

Name : .....

Address : .....

.....

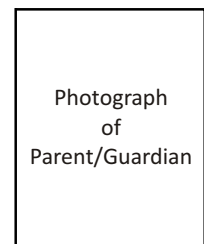
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Phone No. : .....

Mobile No. : .....

Email : .....



**Signature**

Signature Father*	Signature Mother*	Signature Guardian*

\*Mandatory (as applicable)

