

FORM I

[See sub-clause(a) of clause(i) and sub-clause (a) of clause (ii) of sub -regulation(2) of regulation7]

FORMAT OF UNDERTAKING BY THE STUDENT

I.....Son/Daughter of Mr./Mrs./Ms. _____
Admitted to the course of B. H.M.S.....with Admission No.at STATE GHAZIPUR
HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, GHAZIPUR affiliated to MAHAYOGI GURU
GORAKHNATH AYUSH UNIVERSITY, BHATAHAT, GORAKHPUR (U.P.)
MAHAYOGI GURU GORAKHNATH AYUSH UNIVERSITY, BHATAHAT, GORAKHPUR (U.P.) have received
a copy of the National Commission for Homoeopathy (Prevention and Prohibition of Ragging in
Medical Colleges and Institutions) Regulations, 2022 (Hereinafter referred to as the said regulations).

2. I have carefully read and fully understood the provisions.
3. I have also in particular perused the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutesragging.
4. I have also in particular perused the provisions of Chapter IV AND read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging, actively or being part of a conspiracy to promote ragging.
5. I hereby undertake that ___
(i) . I will not indulge in any behavior or act that may come under the definition of ragging as may be constituted under regulation 3 of the said regulations.
(ii) I will not participate in or propagate ragging in any form included but not limited to those that may be constituted under regulation 3 of the said regulations ,
(iii) I will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force .
7. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled /withdrawn.

Signed on this the _____ day of _____ month of _____ year.

Signature

Name:

Address:

Tel/Mobile No:

Signature of Witness 1:

(Name of Witness 2):

Address:

Signature of Witness 2:

(Name of Witness 1):

Address:

FORM II

[See sub-clause(a) of clause(i)and sub-clause (a)of clause (ii)of sub –regulation(2) of regulation7]

FORMAT OF UNDERTAKING BY PARENT/GUARDIAN OF THE CANDIDATE/STUDENT

I.....Father/Mother/ Guardian of Mr./Mrs./Ms. _____
Admitted to the course of B. H.M.S.....with Admission No.at **STATE GHAZIPUR HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL,GHAZIPUR** affiliated to **MAHAYOGI GURU GORAKHNATH AYUSH UNIVERSITY, BHATAHAT, GORAKHPUR (U.P.)**
MAHAYOGI GURU GORAKHNATH AYUSH UNIVERSITY, BHATAHAT, GORAKHPUR (U.P.) have received a copy of the National Commission for Homoeopathy (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations,2022 (Hereinafter referred to as the said regulations).

1. I have carefully read and fully understood the provisions in the said regulation.
2. I have particularly perused the provisions of regulation 3 and 4 of the said regulations and have fully understood what constitutesragging.
3. I have aslo in particular perused the provisions of Chapter IV AND read and understood the administrative and penal actions that may be taken against my son/daughter/ward in case he/she is found guilty of ragging or abetting ragging ,actively or passively, or being part of a conspiracy to promote ragging .
4. I hereby undertake that my son/daughter/ward -
 - a. will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under regulation 3 and 4 of the said regulations.
 - b. will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulation 3 and 4 of the said regulations;
 - c. Will not hurt anyone physically or psychologically or cause any other harm.
5. I hereby agree that if my son/ daughter/ward is found guilty of any aspect of ragging ,he/she may be punished as per the provisions of the said regulations or as per the applicable law for the time being in force.
6. I also declare that he/she has never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, his/her admission is liable to e cancelled/withdrawn.

Signed on this the _____ day of ____ month of ____ year.

Signature Name:

Address:

Tel/Mobile No:

Signature of Witness 1:
(Name of Witness 2):
Address:

Signature of Witness 2:
(Name of Witness 1):
Address: