AFFIDAVIT BY THE STUDENT (SELF ATTESTED DECLARATION AFFIDAVIT)

1. l, _____

_____Enrollment No. _____

D/o Mr./Mrs./Ms.______, having been admitted to <u>Jayoti Vidyapeeth Women's University</u>, have received a copy of the UGC Regulations/ seen on the UGC Website on Curbing the menace of Ragging in Higher Educational Institutions, 2009, (herein after called the "Regulations") carefully read and fully understood the provisions contains 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 me in case I am 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. I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
 - b. I 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 Regulations.
- 5. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law for the time being in force.
- 6. I hereby declare that I have 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, I am aware that my admission is liable to be cancelled.

| Declared this | day of | month o | fyear | <u> </u> |
|---------------|--------|---------|-------|----------|
| | | | | |

Signature of deponent

Name:

VERIFICATION

| Verified that the | contents of this affidavit | are true to the | best of my knowledge | e and no part o | f the |
|----------------------|----------------------------|------------------|----------------------|-----------------|-------|
| affidavit is false a | nd nothing has been conce | aled or misstate | d therein. | | |
| Verified at | on this the | day of | month of | vear | |

| | | Signature o | f deponent |
|-------|--|-------------|------------|
| Solem | nly affirmed and signed in my presence on this the | day of | month |
| of | year after reading the contents of this affidavit. | | |

AFFIDAVIT BY PARENT/GUARDIAN (SELF ATTESTED DECLARATION AFFIDAVIT)

| 1. | I, Mr./Mrs./Ms. | _ (full name of the parent/ |
|----|--|--------------------------------|
| | guardian) father/mother/guardian of , | (Full |
| | name of the Student along with enrollment number), having been a | admitted to Jayoti Vidyapeeth |
| | Women's University, have received a copy of the UGC Regulations/ se | een on UGC Website on Curbing |
| | the menace of Ragging in Higher Educational Institutions, 20 | 009, (hereinafter called the |
| | "Regulations") carefully read and fully understood the provisions cont | tains 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 behavior 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 Regulations.

- 5. I hereby affirm that, if found guilty of ragging, my ward shall be liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against her under any penal 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

| Declared this | day of | month of | year |
|---------------------------------|---|-----------------|-----------------------------|
| Signature of depone Address: | nt Nan | ne: | |
| Contact No.: | | | |
| | VERI | FICATION | |
| | ntents of this affidavit are nothing has been concealed | | nowledge and no part of the |
| Verified at | on this theday | ofmonth | ofyear |
| | | | Signature of deponent |
| | nd signed in my presence year after reading the | | y of |



FORM - C

UNDERTAKING BY THE STUDENT

hereby declare that

1. I have carefully read and shall be reading time to time and understood the rules and regulations. I accept & agree to follow and abide by them.

D/o

- 2. I shall not indulge in any matter that comes under ragging with any fellow mates, staff or faculty member as individual or in a group.
- 3. In case I am found disobeying the rules & regulations at anytime, University authority has the right to take a disciplinary action against me, which could either lead to the extent of rustication from the university. I, my parents/ guardians shall not interfere on the action taken by the university authority in such a matter.
- 4. I shall have no objection incase my photograph/voice, while taking part in the activities of the University, appears in any presentation of the University.
- 5. If ever I become pregnant or have to undergo any prolonged treatment where rest is required, I will be my duty to inform the University Management and abide by the rules of the University.
- 6. I & my parents/ guardian shall be responsible for the payment of all the fees & other charges/fines whenever demanded.
- 7. I shall abide by the examination rules and shall proceed accordingly.
- 8. I hereby declare that Jayoti Vidyapeeth Women's University & Jyoti Vidyapeeth Trust shall not be responsible for any mishappening on my part during the course of my study (on campus or off campus) in the university/ industrial visits/ trainings/ tours/ transport etc. I & also my dependents or next of kin in such a case shall not claim any compensation for my damages or disability.
- 9. I hereby undertake that if I undergo any lawful offence or meet an unauthorized person or misplaced during my outing then university shall not be responsible.
- 10. All the disputes will be referred compulsorily to the "Tribunal of Arbitration" of the University before availing the judicial remedies in a court whose jurisdiction shall be Jaipur District only.

••••••

FULL SIGNATURE OF THE STUDENT

.....

NAME OF THE STUDENT



FORM - D

UNDERTAKING BY THE PARENT'S/ GUARDIANS

S/o/D/o

(NAME OF PARENTS)

Do hereby solemnly affirm & undertake that:

- 1. My daughter <u>has submitted this application form for</u> admission & hostel accommodation/ day boarder's facility with my permission and that I shall be responsible for her good conduct as a student of the university and adhere to the provisions of the Jayoti Vidyapeeth Women's University ordinances/ regulations and rules/ orders/ decisions etc.
- 2. I shall hold myself responsible for payment of her fees and other charges during her stay in the university.
- 3. I also declare that no case has been pending against my daughter in any civil/ criminal court of the country.
- 4. I endorse the undertaking by my daughter.
- 5. I hereby undertakes that if my daughter undergoes any lawful offence or meets an unauthorized person or misplaced during her outing then university shall not be responsible.
- 6. All the disputes will be referred compulsorily to the "Tribunal of Arbitration" of the University before availing the judicial remedies in a court whose jurisdiction shall be Jaipur District only.

| Place: | |
|--------|--|
| | (full signature of the parent/ guardian) |
| | |

Name of the parent/guardian.....relationship with student.....

PROFORMA FOR INDEMNITY BOND (On 10/- STAMP PAPER AND NOTARY)

| Ι | D/o S | h | | £ |
|---|---|--|--|---|
| Smt | Reside | nt of | | |
| | | | stuc | dent |
| Jayoti accou depos Jaipu Fee fo that c Jayoti | Vidyapeeth Women's University, Jaip nt of my surrendering the seat after the ition of Admission Confirmation Fee would suffer on account of my leaving or the program i.e. Academic Fee for wo n demand the said amount shall be p | our again ne Admiss The loon ng the sea whole dur oaid for wo | I undertake to indemnify and keep indem at any loss or damage that may be caused to ion Confirmation letter issued by the Univers as, which Jayoti Vidyapeeth Women's Univers at is assessed and agrees to be complete Acad ation of program by Undertake I further under ith as liquidated damages towards the loss to elay in payment would entitle Jayoti Vidyap | nified it on ity on ersity, demic ertake to the |
| Dated | : | | Signature of the student | |
| Unde | rtaking by the Sureties (Sponsoring P | erson) | Signature of the student | |
| | | | (relatior | n with |
| | | | le and take the surety for the Fee submissi | |
| | to the University o | - | | |
| | | | above by Mr./Ms./ | and |
| | - | | pay the amount equals to complete Academi | - |
| for th | e program i.e. Academic Fee for whol | e duratio | n of program along with the interest @ 12% | to the |
| Jayoti | Vidyapeeth Women's University, | Jaipur i | the event Mr./Ms | |
| | idering her seat after the Admission C sion Confirmation Fee. | onfirmat | on letter issued by the University on Deposit | ion of |
| 1. | Signature | 2. | Signature | |
| | (Student) | | (Sponsoring person) | |
| | Name & Full Address | - | Name & Full Address | |
| | Witness: | - | | |
| 1. | Signature | 2. | Signature | |

Name & Full Address

Name & Full Address



FORM - F

CERTIFICATE OF MEDICAL FITNESS

(To be completed by parents prior to entry into the university)

BIODATA

| 1. Name of Student: | |
|--------------------------------|--------------------------|
| 2. Date of Birth: | Age |
| 3. Name of Parent or Guardian: | |
| 4. Telephone:Emergency | Local Contact No(if any) |
| 5. E- Mail: | |

MEDICAL HISTORY

Does your ward have any of the following conditions?

| Asthma? Yes No | Hypertension? Yes No Diabetes |
|--|---|
| mellitus? Yes No | Heart disease? Yes No |
| Tuberculosis? Yes No | Epilepsy/seizure disorder? Yes No |
| Mental illness? Yes No | Kidney disease? Yes No |
| Liver disease? Yes No | Allergies ? Yes No |
| Drug addiction? Yes No | Any drug Allergies? Yes No |
| If yes to any/ some of the above, kindly give details: | |
| | |
| Is your ward presently on medication? Yes No | |
| Kindly give details including names of medication ar | nd dosages |
| | |
| Name of the Doctor | and his/her contact no |
| F/ | 0 |
| hereby declare that all the above mentioned details and I am submitting all the related records with this M | s provided are correct and best of my knowledge |
| PLACE: DATE: | NAME AND SIGNATURE OF MOTHER/FATHER |

THE CANDIDATE MUST BE MEDICALLY FIT AS PER THE COURSE REQUIREMENT.

JAYOTI VIDYAPEETH WOMEN'S UNIVERSITY, JAIPUR



Established by Govt. of Rajasthan under Act 17 of 2008 as per UGC Act, 1956

FORM - G

TELECOMMUNICATION FORM (2016-17)

| (Fill this | form if | opted fo | r Hostel | Accommode | ation) |
|------------|---------|----------|----------|-----------|--------|
| | | | - | | |

| STUDENT'S NAME : | F | ATHER'S NAME : | ••••• |
|------------------|----------|-----------------|------------|
| COURSE: | BRANCH : | ENROLMENT NO. : | |
| HOSTEL NAME : | ROOM NO | CONTACT NO. : | •••••••••• |

I ALLOW MY DAUGHTER TO TAKE CALLS TO THE FOLLOWING NUMBERS ONLY

| | NAME | PERMITTED INCOMING CALL | |
|-----|-----------------------------|------------------------------|---------------------------|
| | | RELATION WITH STUDENT | CONTACT NO. WITH STD CODE |
| 1. | | ••••••••• | |
| 2. | •••••• | •••••• | |
| 3. | •••••• | •••••• | |
| 4. | •••••• | •••••• | |
| 5. | | | |
| 6. | •••••• | •••••• | •••••• |
| 7. | •••••• | •••••• | |
| 8. | | | |
| 9. | •••••• | •••••• | •••••• |
| 10. | | •••••• | •••••• |
| | PERMITTED OUTGOING | | |
| | CALLS NAME | RELATION WITH STUDENT | CONTACT NO. WITH STD CODE |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | •••••••••• | |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| 9. | | | |
| 10. | | | |
| REC | SISTRATION OF MOBILE NUMBER | S FOR SMS | |
| 1. | | relation) Mobile N | umber |
| 2. | | relation) Mobile N | umber |
| | | | |
| | | | |

DATE :

SIGNATURE OF PARENT/ GUARDIAN

Official use only

| Submission Date / / | by | to Jv'n | | @ Reception | /CC |
|---------------------|---------------|---------|--------|-------------|------|
| Verified by Jv'n | at Registered | noon l | Date// | time h | neld |
| with(Father | /Mother) | | | | |

Signature of Verifying Officer



FORM - H

MEETING PERSONS FORM 2016-2017

(For Hostellers)

| STU | DENT'S NAME | • | FATHER'S NAME | = : | |
|------|-----------------|----------|--|-----------------------|-------------|
| COU | RSE: | ••••• | BRANCH :ENF | ROLLMENT NO. : | ••••• |
| HOS | TEL NAME : | ••••• | ROOM NO CONTACT | ⁻ NO. : | •••••• |
| Kind | ly fill those J | people's | s details with Photograph who shall be vis | iting to meet with yo | ur ward. |
| 1. | NAME: | | | | |
| | ADDRESS:. | | | | |
| | | | MOBILE | | 1 |
| | | 2. | NAME: | | ••••• |
| | 2 | | ADDRESS: | | |
| | | | LANDLINE NO | | |
| 3. | NAME: | | | | |
| | | | | | 3 |
| | | | MOBILE | | |
| | | 4 | NAME | | |
| | 4 | | ADDRESS: | | |
| | - | | LANDLINE NO | | |
| | | | | | |
| PARE | NT/ GUARDI | AN'S NA | ME | SIGNATURE OF PAREN | T/ GUARDIAN |
| | | | Official use only | | |
| | | | byto Jv'n at Registered noto. | | |

with.....(Father/Mother)

Signature of Verifying Officer



JAYOTI VIDYAPEETH WOMEN'S UNIVERSITY, JAIPUR

Established by Govt. of Rajasthan under Act 17 of 2008 as per UGC Act, 1956

FORM - I

SPECIAL CONSENT FORM (OUTING 2016-17)

Outing on Sundays/Holidays by University Transport or Self Transport

| STUDENT'S NAME : | FATHER'S/ MOTHER NAME | | | |
|------------------|-----------------------|-------------|-------------------|--|
| COURSE : | BRANCH : | | ENROLLMENT NUMBER | |
| HOSTEL NAME : | | _ROOM NO. : | CONTACT NO | |

Outing on Sundays/Holidays by University Transport or Self Transport.

Please write the complete sentence, declaring the permission for your ward after reading all the information in this regard.Please keep in mind that this **consent will be treated as your approval for Outing** (University Transport/Self) and **No other permission** will be taken from via SMS or application or verification over phone.

Parents in respect of Outing with university Transport. In case you permit Outing for your ward (Self/UniversityTransport), University will not be responsible in any case. University will be responsible for **providing only transport facility** to the ward to the destination only on prescribed timings.

(Note:- Please write clearly regarding your ward Permission after reading all details) "Permitted with University Transport" or "Permitted by Self Transport" or "Not Permitted"

- 1. University Transport: All the students who are on University outing are expected to come and boarduniveristy transport by 4.00 p.m. at the dropping point. In case any student fails to reach on time; University Transport will not wait for her and return back to the University Campus along with the otherstudents. University will launch complaint, Missing FIR at Police Station for such students. University willcancel her outing for next six months and may also take any disciplinary action against her.
- 2. Self Transport: Incase student fails to reach University Campus by 7.00 p.m. University will launchcomplaint, Missing FIR at Police Station for such students. University will cancel her outing (UniversityTransport or Self) for next six months and may also take any disciplinary action against her.

Declaration:

f/o

hereby undertake that if my daughter undergoes any lawful offence or meets any unauthorized person or escapeunlawfully /or any activity which is considered in breach of rules, during her outing then university shall not beresponsible. If parents need any special surveillance for her daughter, kindly contact to Registrar and give complete details if they had any doubt .keep faith your case will be not disclose to everybody and will be a secret.

DATE.....

SIGNATURE OF FATHER/MOTHER/GUARDIAN

Official use only

| Submission Date/ by | to | Jv'n | |
|---------------------|------------------|----------|-------------|
| Verified by Jv'n | at Registered no | on Date/ | ./time held |
| with(Father/Mother) | | | |

Signature of Verifying Officer