

DECLARATION

I

Solemnly affirm and declare That :

Information in this form is correct to the best of my knowledge and belief and nothing has been concealed by me.

I shall fully abide by the others, rules and regulations of this College as stated in the prospectus.

Ignorance will not be considered.

I shall not violate the rules of the college by taking part in any kind of strikes or such other activities harmful to the administration/ College. If I do so, my name should be struck off from the college and shall not be allowed for refund of fees paid.

I admit that any charges/ fees paid to the college will neither be refundable nor transferable, whatsoever may be the reason.

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In case, I leave the College before the completion of the course, I shall be liable for payment of all dues of the college.

I shall pay the fees and all other dues in time as mentioned in the prospectus/ notified from time to time.

I will attend regular classes, participate in college activities self development programmes.

All the disputes are subject to the jurisdiction of Gautam Budh Nagar Court only.

This is to certify that I father/ guardian shall be responsible for regular payment of fees, any other dues, good conduct & welfare of (name of the student) during her/ his studies in SUMITRA INSTITUTE OF NURSING AND PARAMEDICAL SCIENCES, Greater Noida.

Ragging is Strictly Banned in College Campus

Signature of the Father/ Guardian

Date Signature of the Candidate

Enclosure (s) : 1.

- 2.
- 3.
- 4.
- 5.
- 6.

(For office use only (to be filled in by the admission officer)

Date of Admission Admission No.

Course Receipt No.

Category : GEN/ SC/ ST/ OBC

Remarks : Checked qualification, age, subject and percentage admission may be given.

(Admission Officer)

Admitted

Signature of the registrar

Signature of the Principal