UGC ANTI RAGGING UNDERTAKING BY STUDENTS AND PARENTS/GUARDIANS

Fields marked with red^{*} are compulsory.

Personal Details										
Chudentie Femily Neme *										
Student's Family Name *										
Student's Middle Name										
Student's First Name *										
Gender * Male Female other										
							1			
Nationality *										
L										
*										
Student's Mobile Number [*] +91										
Student's friends Mobile Number in case of an										
emergency * +91						ſ	r	[]		
Landline Number +91										
Student's email ID *										
@										
Your Permanent		I	I		I	1				
rour remanent										
Address 1 *										
Address2										
*										
City *										
State *										
Sidle							I			

Parent/Guardian Details

Parent/Guardian's name*										
Parent/Guardian Address 1*										
City *										
State *										
Residence Phone No *										
Mobile No of Parent/Guardian*										
Parent/Guardian's Email ID *										
@										
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.....hereby declare that, both I will not indulge in, nor tolerate ragging, in any form, even in words or intentions, and I accept to give an undertaking in the prescribed format of UGC for the same.

Place:..... Date:.....

Signature of Parents/Guardian

Signature of Student

College Details

State in which the College is												
Is it a Professional College or a General College												
Name of the College *												
Name of Affiliated University												
* It is Deemed University * ^{Yes No}												
Director/Principal Family Name [*]												
Director/Principal First Name *												
Director/principal Gender *												
Male Female												
College Phone No. 1*												
Course Details												
Under Graduate or Post Graduate	e *											
Name of the Course *												
	F					1				1	.	

Your Registration/Enrolment Number

How many students are in your Class *

Year of Study*