

Form No 6: Anti Ragging Affidavit by Parent / Guardian

I, (Name of Parent/Guardian) _____
father/mother/guardian of (Student's name) _____,
having admitted to the programme _____, residing in _____
hostel of the Room No. _____ have received a copy of the UGC Regulation on
Curbing the Menace of Ragging in Higher Education Understood the
provisions contained 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 behaviour 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 clause 3 of the
Regulations.

5. I hereby affirm that, if found guilty of ragging, my ward is liable for
punishment according to clause 9.1 of the Regulations without prejudice to any
other criminal action that may be taken against my ward under any penal law or
any 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 be untrue, the admission of my ward is
liable to be cancelled.

NOTARY PUBLIC/OATH COMMISSIONER

(Affidavit on the stamp paper of 10/- and should be notarized)

Declared this _____ day of _____ Month of _____ year _____

Signature of deponent

Name

Address

Telephone/Mobile

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this _____ (day) of _____ (Month)
_____ Year _____

Signature of deponent

Solemnly affirmed and signed in my presence on this _____ (day) of _____ (month), _____ (Year) after reading the contents of this affidavit.

NOTARY PUBLIC/OATH COMMISSIONER

(Affidavit in the stamp paper of 10/- and should be notarized)