

AFFIDAVIT

1. I, _____ S/D/O _____ having CNIC# _____ solemnly declare that all the particulars mentioned in the application form are true and correct and I fully understand that if any of the statements made in the application is found to be incorrect or any document produced with this form is found False/Fake/Fabricated, my admission would be liable to be canceled at Al-Aleem Medical College. If, otherwise, eligible for admission and admitted, would be liable to be expelled from the college at any time/ any stage during the course of my studies and in that case all fee and other dues paid by me to the college shall be forfeited. Besides any action under relevant law including criminal proceedings might be initiated against me.
2. I have gone through the Pakistan Medical & Dental Council admission regulation 2023-24 and I undertake to abide by all conditions. Besides, rules and regulations of University of Health Sciences shall also be binding on me.
3. I also solemnly declare that I shall abide by the discipline, rules and regulations of the college as enforced at present and made from time to time by the college authorities in future. I shall concern myself only with the academic activities and extracurricular activities, which are allowed by the college for the healthy growth of body and mind.
4. I undertake that I shall not take part in any political activity or agitation and I shall not become a member of any student wing of political, sectarian or cast-based parties of Pakistan. In matters of discipline, the decision of the head of the institution will be final and binding on me and I shall not challenge that decision in any court of law in the country.
5. I shall be regular in paying college's dues and will be punctual in attending my classes. I shall not be absent from teaching programs without prior permission of the authority.
6. I undertake that so long as I am a student of the institution, I shall do nothing either inside or outside the institution, hostels and hospital premises that may interfere with its orderly administration and discipline or may bring the institution or its administration in disrepute.
7. I, understand that my admission is provisional, finality/confirmation of which is subject to verification of my documents, enrolment by University of Health Sciences and registration by Pakistan Medical & Dental Council
8. I understand that in case of failure in depositing fee by due date, my admission shall, automatically, stand cancelled.
9. I have given my correct address in my Application Form and any correspondence at my postal or electronic mail address shall be termed as received by me. However, I shall immediately provide my contact numbers and address if and when there is any change.
10. I assure this college that I have not accepted/got prior admission in MBBS Session 2023-24 in any other college.

Signature of the Student

Signature of Father/Guardian
Of the Student