Stamp 10/-

// DECLARATION FORM //

While seeking admission in Veerangana Avantibai Lodhi Autonomous State Medical College, Etah I hereby declare that the records and documents which have been submitted by me to your office are true to the best of my knowledge. In case any of my documents submitted by me are found false or forged, my admission may be cancelled and I will be no right to claim for the refund of fees deposited by me.

I shall abide by the directives regarding the discipline and am also prepared to pay fee if and when it is revised by the Govt. of U.P.

Signature :-…….

Full Name of Student :-……..

Full Address:- (Correspondence)	Full Address:- (Permanent)
……	…….
……	…….
……	…….
……	…….
……	…….