UNDERTAKING- DPT/MIT

I_____Son/Daughter of

(To be signed by the candidate and parents at the time of submission of admission form.)

Declare that the information provided in the application form is correct. I have read and understood the terms and conditionsof the admission procedure.
I undertake to abide by the "Code of Conduct" of SAHS, CMH Lahore Medical College and othe rules, regulation and instructions issued by the administration from time to time & I affirm my physical and mental health, free from any condition that may hinder my medical education in this institute pledging to abstain from non-prescribed drugs. Moreover, I declare that I have been informed that: -
I have to ensure at least 85% attendance "Individually" in each subject being taught in that year (in lectures / practicals / clinical sessions) and 85% marks in the class tests / send up examination; otherwise the college administration may not allow me to appear in the university examination. The attendance of subjects not being examined in the same year will "also be carried forward till the year of examination of that subject and will beincluded in minimum 85%" attendance calculation for being eligible to appear in university annual examination. Any type of leave, including medical leave, granted to me during the course of studies will not condone a deficiency in attendance.
If any document submitted by me found to be incorrect or false/fake/fabricated, I would be liable to refusal for admission to SAHS, if otherwise eligible for admission and admitted, would be liable to be expelled from the institution at any time during the course of my studies in which case all fee and other dues paid by me to the institution shall be forfeited besides initiation of any action under law including criminal proceedings against me.
The college administration can take any disciplinary action, including expulsion from the college, or violation of discipline and in such cases the decision of the Chief Executive / Principal will be final.
I have adequate financial resources to support my studies at the college. I fully understand that fee, once paid will be refundable as per UHS/Institution regulations, where applicable, I will not object to any additional charges levied in the future by the Government, University or College.
I have read over and understood the college refund policy.
I, solemnly declare that I have not been expelled from any medical college for any reason what so ever and I have not been disqualified on completion of admissible chances to appear in 1st professiona DPT / MIT from any Medical / Dental College of Pakistan.
I hereby solemnly declare that I have not been convicted by any court of law nor I am under trial in anywhere in Pakistan / Abroad.
Moreover, I will also abide by all rules and regulations laid by University of Health Sciences, HEC as well as SAHS, CMH LMC & IOD.
Name and Signature of the student
Date:2024
(Name and counter signature of the Parent/guardian)