**STUDENT UNDERTAKING AFFIDAVIT**

(To be submitted by the Student on Non-Judicial Stamp Paper of ₹50/-)

I , Mr./Ms. _____, aged _____ years, son/daughter

of Mr./Mrs. _____, resident of _____

_____

having been admitted to the B.Sc. Nursing Programme at St. Thomas College of Nursing, Jaipur, do hereby solemnly affirm and undertake as follows:

1. That I have been allotted admission to the B.Sc. Nursing Programme for the Academic Session 20_____- 20_____at St. Thomas College of Nursing, Jaipur, pursuant to Allotment Letter No.

_____ issued by the Rajasthan University of Health Sciences (RUHS).

2. That I shall submit all original documents, certificates, declarations, affidavits, and prescribed fees within the stipulated time. I understand that my admission is provisional until all eligibility requirements are duly verified and approved. If any document is found to be false or incorrect at any stage during the course of my studies, my admission shall be liable to be cancelled.

3. That I shall abide by all Rules, Regulations, Ordinances, Code of Conduct, academic policies, and instructions issued by the College Management, College Administration, Principal, Regulatory Authorities, and other competent authorities from time to time.

4. That I shall remain a regular student throughout the B.Sc. Nursing Programme and shall comply with all academic requirements, including the prescribed attendance, clinical postings, internship requirements, and other obligations as prescribed by the College, the University, the Indian Nursing Council (INC), the Rajasthan Nursing Council (RNC), the Rajasthan University of Health Sciences (RUHS), and other competent authorities. I understand that if I fail to maintain the prescribed attendance, I may be debarred from appearing in the University Examination and/or practical examinations.

5. That in order to complete the B.Sc. Nursing Programme, I shall complete 100% clinical training/postings in every subject every academic year and maintain not less than 80% attendance in theory classes as prescribed. I understand that in the event of shortage of attendance, my examination form for that academic year may be withheld and I may be debarred from appearing in the University Examination and/or practical examinations.

6. That I shall attend all academic, practical, laboratory, simulation, clinical, and examination activities in the prescribed uniform and identity card.

7. That I shall maintain discipline throughout the period of training. I shall not indulge in ragging, violence, bullying, harassment, discrimination, substance abuse, damage to college property, or any unlawful, immoral, or anti-social activity. In the event of any negligence, indiscipline, misconduct, or violation of the College Rules and Regulations, I shall be personally responsible for the disciplinary action taken against me. The decision of the management and/or administration in such matters shall be final and binding upon me.

8. That I further declare that the prescribed Anti-Ragging Affidavits have been submitted by me and my parent/guardian, and I shall strictly comply with the Anti-Ragging Regulations. In the event

of any violation of the Anti-Ragging Rules, I shall be personally responsible for the disciplinary and legal action taken against me.

9. That I understand that any revision in the prescribed fees shall be binding upon me. I undertake to pay all prescribed fees, penalties, fines, and any other dues payable by me within the stipulated period. I further understand that failure to do so may render my admission liable to cancellation, and I may be debarred from appearing in the University examinations, practical examinations, or any other academic activity, in accordance with the applicable Rules and Regulations.

10. That I shall not simultaneously pursue any other full-time course or employment unless specifically permitted by the competent authority.

11. That if I voluntarily discontinue or withdraw from thr B.Sc. Nursing programme, I shall not claim refund of the fees deposited by me under the Rules of the Government of Rajasthan. I further undertake to pay the prescribed penalty of ₹2,85,000/- (Rupees Two Lakh Eighty-Five Thousand Only) or such other amount as may be prescribed under the applicable Rules.

12. That I shall immediately inform the College of any change in my residential address, mobile number, email address, parent/guardian details, or emergency contact information.

13. That I understand that violation of the College Rules, Code of Conduct, academic regulations, or any act of indiscipline or misconduct may result in disciplinary action including suspension, cancellation of admission, withholding of examination results, recovery of dues or damages, monetary penalties, rustication, expulsion, or any other action deemed appropriate by the College Management.

14. That I further undertake to comply with every decision, direction, circular, notification, guideline, or order issued by the College Management, College Administration, Principal, University, Indian Nursing Council (INC), Rajasthan Nursing Council (RNC), Rajasthan University of Health Sciences (RUHS), or any other competent statutory authority from time to time.

15. That I further undertake and agree that the decision of the College Management and/or College Administration in respect of admission, academics, attendance, examinations, clinical training, discipline, code of conduct, fees, hostel accommodation (where applicable), institutional policies, interpretation of College Rules and Regulations, or any other matter concerning the administration of the College shall be final, conclusive, and binding upon me and my parent(s), guardian(s), authorised representative(s), legal heir(s), or any person acting or claiming on my behalf. I further undertake not to dispute or challenge such decision except in accordance with the applicable statutory provisions.

16. That I hereby declare that I have carefully read, understood, and accepted all the Rules, Regulations, and policies of St. Thomas College of Nursing and undertake to comply with them throughout the duration of my studies.

Place:

Date: Signature of Student

# VERIFICATION

I hereby verify that the contents of this affidavit are true and correct to the best of my knowledge and belief and that nothing material has been concealed or misstated therein.

Place:

Date: Signature of Student

Signature of the Student: _____