



राष्ट्रीय फैशन प्रौद्योगिकी संस्थान

राष्ट्रियक संस्थान निष्ठ अधिनियम 2006

बल्ल मंगलक, भारत सरकार

NATIONAL INSTITUTE OF FASHION TECHNOLOGY

A Statutory Institute under the NIFT Act, 2006

Ministry of Textiles, Government of India

(ONLY FOR THE CANDIDATES SEEKING PROVISIONAL ADMISSION)

To be submitted at the Time of Counselling

I/my ward _____ (name of the candidate)
 son/daughter/wife of _____ (Father's/Husband's name)
 resident of _____ (Permanent
 address) seeking admissions to _____
 _____ (name of the course) of

NIFT, hereby solemnly affirm and declare:

1. That I have/my ward has appeared in the 12th Class/final & semester/final year (name of the qualifying (Board/university), the result of which has not yet been declared.

OR

I have/my ward has compartment/supplementary in 12th Class/final year/final semester of _____ and I have/ my ward has appeared in the examination, result of which has not yet been declared.

2. I have/my ward has passed all the papers of the qualifying degree _____ (name of the qualifying degree) examination other than the final year/final semester examination (For PG candidates)
3. I undertake to submit the qualifying mark sheets/certificate by 30.9.2021 failing which the provisional admission shall stand cancelled without any further notice to me/my ward.
4. That I have/my ward understand that the offer for admission is provisional in the event of failure to submit the documents as required, the provisional admission to the said course will be automatically cancelled and full deposited fee will be forfeited.
5. I certify that all documents submitted by me are genuine. I fully understand that documents submitted by me will be verified as deemed fit by NIFT. If any documents claim statement is proven to be false, fabricated or fraudulent my admission is likely to be cancelled and full fees paid by me will be forfeited.

Signature of Candidate

Notes:

- I. In case the candidate is minor i.e. below 18 years of age; the undertaking shall be signed by his/her parent/guardian.
- II. Submission of false information is a punishable offence. If, it is found at any stage that false undertaking was submitted, admission shall be cancelled and legal proceeding shall be initiated, for which candidate/parent/guardian shall be responsible.

Signature of Candidate

Signature of the Parents/Guardian



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बस्तर मंत्रालय, भारत सरकार

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Undertaking from the students, as per provisions of anti-ragging verdict by the Hon'ble Supreme Court

I Mr./Ms./Mx. _____ Roll No _____ Merit Rank _____
seeking admission in the programme _____ do hereby undertake this
day _____ Month _____ Year _____ the following with respect to above subject:

1. That I have read and understood the directives of the Hon'ble Supreme Court of India on anti-ragging and the measures proposed to be taken in the above reference.
2. That I understand the meaning of ragging and know that ragging in any form is a punishable offence and the same is punishable with imprisonment and/or, fine and is prohibited by the Directives of the Court of Law.
3. I understand that if any information is brought to the notice of NIFT authorities regarding my participation in any ragging activities, the NIFT authorities are bound by law to report the same to the concerned Police Authorities for investigation and prosecution.
4. That I have not been found or charged for any involvement in any kind of ragging in the past. However, I undertake to face disciplinary action/legal proceedings including expulsion from the Institute if the above statement is found to be untrue or the facts are concealed, at any stage in future.
5. That I shall not resort to ragging in any form at any place and shall abide by the rules/laws prescribed by the Courts, Government of India and the NIFT authorities for the purpose from time to time.

Date:

Signature of the candidate

I hereby fully endorse the undertaking made by my child/ward.

Signature of the Mother/Father/Guardian

Signature of the Witness:

1.

2.

(For Children / Ward of NRI)

Annexure III



राष्ट्रीय फैशन प्रौद्योगिकी संस्थान

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UNDERTAKING

1. I....., certify that I am a NRI PIO/Foreign National/ SAARC/ and Non Resident Indian as specified in the Income Tax Act, 1961. My present address is.....

.....
..... A copy of passport is enclosed herewith.

2. I....., do hereby certify that I am willing to bear the expenditure of my child/ward(Name of the candidate), for his / her entire study in NIFT.

3. The particulars of my registration with the concerned tax Authorities of the Country of my domicile are as follows:

.....
.....
.....

4. I am aware that my child/ward shall be granted admission to a campus of NIFT as per merit and the decision of NIFT.

5. I also certify that I have carefully read and understood all the conditions relating to NRI admissions, fee and study at NIFT. I undertake to follow the same faithfully and any amendments to these, in future, relating to NRI Students, would be acceptable to me.

(Name and Signature of the Sponsor)

Address:

Date :

Place :

CANDIDATE'S STATEMENT OF DECLARATION

Candidate must fill the details of the Form A before a medical examination by medical officer in any Government hospital. Form B is to be filled by the medical officer. The officer will also certify the fitness of the candidate and attest the photograph of the candidate.

FORM A

1.	Name in full (Block letters)	
2.	Age and place of birth	
3.	Present Residential Address	
4.	Permanent Residential Address	
5.	Details of having suffered from any major illness in last five years. Any skin related problem Enlargement or suppression of gland Asthma Heart disease Lung disease Fainting attacks/Epilepsy Rheumatism Appendicitis? (Give details) b) Any other disease or accident requiring confinement to bed and medical for surgical treatment? (Give details)	
6.	a) Details of vaccinated in last three year. b) have you been vaccinated for Covid-19.	
7.	Have you or any of your immediate family member has been afflicted with Rheumatism/Arthritis, Asthma Epilepsy or mental illness of any kind?	
8.	Have you at any time suffered from any form of psychiatric disorder? Give details.	
9.	Furnish the following particulars concerning your family: Father's age and state of health	
10	If not alive, Father's age at the time of his death and cause.	
11	Mother's age and state of health	
12	If not alive, Mother's age at the time of her death and cause.	

I declare that the above information is the best of my belief, true and correct. I also affirm that I have not received a disability certificate on account of any disease or other condition.

Signed in my presence
Signature of Medical Officer with stamp

(CANDIDATE'S SIGNATURE)
(in presence of Medical Officer)

FORM B

1.	Candidate's Eyesight	
2.	Any known Allergies (details)	
3.	Last Surgical Intervention (if any) with cause/reason	
4.	Any chronic medical condition	
5.	Any congenital medical condition	
6.	Any Disability (orthopedic) Muscular, nerve etc.)	

MEDICAL CERTIFICATE OF FITNESS

I hereby certify that I have medically examined Ms./Mr./Mx.....for admission in the National Institute of Fashion Technology. The candidate has no disease(communicable or otherwise) or any constitutional weakness or bodily infirmity except I further certify that I am not related to the candidate and not known to any member of his/ her family.

Photograph of the candidate attested by the Medical Officer

Signature of Medical Officer with stamp