#### FORMAT FOR UNDERTAKING FOR CANDIDATES SEEKING PROVISIONAL ADMISSION

I/my	ward	(name of the candidate) son/daughter/wife of	
of		(Father's/Husband's name) resident (Permanent address) seeking admission to	
	(name of	the course) of NIFT, hereby solemnly affirm and declare:	
1.	of the qualifying Board/universit	ed in the 12th Class/final semester/final year (name ty), the result of which has not yet been declared.  OR  ompartment/supplementary in 12th Class/final year/final and I have/ my ward has appeared in the examination,	
	result of which has not yet been	declared.	
2.		passed all the papers of the qualifying degree (name of the qualifying degree) examination other er examination (For PG candidates)	
3.		ring mark sheets/certificate by 30.9.2023 and fully understand on shall stand cancelled without any further notice to me/my	
4.	failure to submit the documents	d that the offer for admission is provisional. In the event of as required, the provisional admission to the said course will deposited fee will be forfeited.	
5.	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 statem proven to be false, fabricated or fraudulent my admission is likely to be cancelled and ful paid by me will be forfeited.		
	Date Place	Candidate's Signature	
		(Signature of Parent)	

Notes: I. In case the candidate is minor i.e. below 18 years of age; the declaration shall be signed by his/her parent/guardian. II. If, it is found at any stage that false declaration has been submitted, admission may be cancelled and legal proceeding may be initiated, for which candidate/parent/guardian shall be responsible

# <u>UNDERTAKING FROM THE STUDENTS, AS PER PROVISIONS OF ANTI-RAGGING VERDICT BY THE HON'BLE SUPREME COURT</u>

l Mr./Ms	Roll No	Merit
Rank seeking admission in the progr	ramme	do hereby undertake this
day MonthYear	the following with re	espect to above subject:
That I have read and understood the the measures proposed to be taken	•	reme Court of India on anti-ragging and
		any form is a punishable offence and the d by the Directives of the Court of Law.
-	uthorities are bound by law to r	T authorities regarding my participation report the same to the concerned Police
That I have not been found or charged for any involvement in any kind of ragging in the past. However, 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 a Courts, Government of India and the		bide by the rules/laws prescribed by the se from time to time.
Date:		Signature of the candidate
Thereby fully endorse the undertaking r	nade by my child/ward.	
	Si	gnature of the Mother/Father/Guardian
Signature of the Witness:		
1.		

2.

## **UNDERTAKING FOR NRI SPONSORED SEATS**

a.	I, certify that I am a Foreign National or Non Resident Indian as specified in
	the Income Tax Act, 1961. My present address is
	first & last pages of the passport and a copy of a valid visa is enclosed herewith.
b.	I
C.	I, do hereby certify that I am willing to bear the expenditure of(Name of the candidate), for his/her entire study at NIFT.
d.	The particulars of my registration with the concerned tax Authorities of the Country of my domicile are as follows:
e.	I am aware that(Name of the candidate) shall be granted admission to a campus of NIFT as per merit.
6.	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)
	Address:
Dat	re:
Pla	ce:

### **UNDERTAKING FOR REFUND OF FEE**

- 1. I confirm and state that the certificates furnished by me are true and correct to the best of my knowledge. No part of it is false or fabricated and nothing has been concealed. I hereby undertake that if any certificate submitted by me is found to be false/fabricated or not conforming to the stipulated standards mentioned in the Admission Guidelines, my admission will be cancelled without any notice and the fee paid by me will be forfeited.
- 2. I confirm and state that I have undergone the admission formalities as laid down in the Prospectus-2023 of NIFT. I understand that if I fail to submit the proof of eligibility by the stipulated date, my admission will be automatically cancelled.
- 3. There fund against withdrawal of seat will be governed as under:

Time	Amount to be refunded
Before commencement of Final round of seat allocation. Date to be declared on NIFT website later.	Full fee, except registration fee
Candidate who withdraw after date decided by NIFT	Only security deposit

- 4. I accept that the refund against my withdrawal of the allotted seat shall be refunded as per the above guideline.
- 5. I also undertake that I will not bring any outside pressure on NIFT authorities in any regard and if found, it will make me liable for disciplinary action which may include expulsion from NIFT.
- 6. I shall abide by the rules and regulations of the NIFT as amended from time to time.
- 7. I hereby declare that I have read and understood the content of the undertaking and I am aware of its implications.

(Signature of the Candidate)

(Signature of the Parent / Guardians)

Place	:		
Data			

#### **MEDICAL CERTIFICATE OF FITNESS**

Candidate must fill the details of the Form-A before medical examination by the 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 vaccination in last three year. b) Details of vaccination for Covid-19. (1st & 2nd Dose)	
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.

#### 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**

hereby certify that I have medically examined Ms./Mr./Mx	for admission in the
National Institute of Fashion Technology. The candidate has no dis	ease (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