AFFIDAVIT
(to be typed on Rs. 100/- Stamp Paper)

I,	S/O, D/O	resident of
		do hereby solemnly
declare that I, will abide by	he discipline, rules and regulations of Rawal	pindi Medical University
Rawalpindi as enforced at pr	sent and made from time to time by the Unive	ersity authority in future
will concern my self only w	th the academic activities and such extra curri	icular activities which are
	the Healthy Growth of body and mind. I furth	
	ties or agitation. I will be regular in paying of	
	lasses. I will not absent myself from teaching	
permission of the authority.		
I have been informed	bout the integrated learning programme and h	ave no objection to study
	ormed that decision of university administra	
hallenge in any court of law		
If I violate the above	ffidavit I shall be liable to the appropriate pur	nishment(s) prescribed in
	ent Medical Colleges in the Punjab.	(-,
	Signature of the Candi	idate
	Name of Candidate	
	Signature of Father/Gu	uandian
	Father/guardian Name	
	Citie iio.	
	Adress:	
	Phone No.	

ATTESTATION BY FIRST CLASS MAGISTRATE