

AFFIDAVIT

(TO BE TYPED ON STAMP PAPER OF RS. 100/=)

| l | S/o, D/o |
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| | uslim/Non-Muslim adult R/o |
| | |
| _ | a candidate for admission in 1 st year Doctor of Physiotherapy for |
| 12 | ademicsession 2023 do hereby state on solemn affirmation / oath as under: |
| 1. | That, I am a holder of P.R.C. of Districtin |
| | Pakistan, which was issued on the basis of Domicileof |
| | Districtissued to me/my father/mother, and I have |
| _ | no other PRC / Domicile of any other District in Pakistan |
| 2. | That, if, I am allowed admission in Doctor of Physiotherapyon merit seat of District, |
| | or otherwise againstreserved seat under Self-Financeor Overseas on the basis of Domicile/ PRC, I |
| | shall not seek admission in any other Public/ Private Sector Medical or Dental College / University |
| 2 | or any other Degree College/ University of the Country againstany seat of other District. |
| 3. | That, all documents submitted by me along with application form are genuine and correct and no |
| | false documenthas been submitted. If any document/ information is found to be false, incorrect |
| 1 | or otherwise I know that my admissionis liable to be cancelled. For wasting precious seat of District Merit, else I will not be entitled to issuance of any certificate |
| 4. | from the Institution. That, after my Final Selection/ Provisional Admiss on Merit/ Self-Finance/ |
| | Overseas category in five years Degree Program of Doctor of Physiotherapyshall complete the |
| | Course/ Degree Program of five years containing ten (10) semesters. However, in case, I leave the |
| | Institute of Physiotherapy(SIMHS) Jamshoro before completion of the Course, I shall be liable to |
| | penalty of Rs. 100,000/- (Rupees One Hundred Thousand/ One Lac) only payable through Pay |
| | Order / Demand Draft infavor to SIMRAH INSTITUTE OF MEDICAL AND HEALTH SCIENCES(SIMHS) |
| | Jamshoro. |
| 5. | That, I also undertake not to involve myself in any kind of Political Activity throughout tenure in this |
| ٠. | institution as a student and incase, I am found involved in such activities, the authority of the |
| | Institute/ University shall be at liberty to expel/rusticate me and to cancel my admission. |
| 6. | That, I also state that I have gone through all the rules, terms and conditions of the admission's, |
| 75.75 | studies and declare that my priority of choice for Degree/ Course is indicated in the Application |
| | Form. |
| 7. | That, whatever is stated above is true & correct to the best of my knowledge belief. |
| | |
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| | Signature of the Deponent |
| | C.N.I.C. NO |
| Ιh | e deponent named above is identified by me to the Commissioner for taking affidavit. |
| _ | ADVOCATE Land of the state of t |
| 50 | lemnlyaffirmed on oath this day of 2023 at |
| Λ. | by deponentnamed above who is identified to me by Mr./ Mslvocate whom I know. The contents were first truly & audibly read over & explained to the deponen |
| - | languagewho appears to have understood the same & put |
| in_ his | // her signature in my presence. |
| cos | Attestation |
| | 1st Class Magistrate |
| | i Classinagistrate |