

AFFIDAVIT

Mr./Ms. _____, Son/Daughter of _____,
aged _____ years, residing at _____,
do hereby solemnly affirm and declare as under:

- That I have voluntarily taken admission in the course/programme titled _____ offered by _____ (Organization Name).
- That I understand that the said programme is a Non-Formal Education / Skill Development / Vocational Training Programme conducted by an Autonomous Organization, and that any Certificate, Diploma, Mark Sheet awarded by the organization is only for knowledge and wisdom.
- That I have carefully read and understood the course structure, duration, etc all details, examination/assessment criteria, and other rules, regulations, and policies of the organization.
- That I shall abide by all rules, regulations, code of conduct, and policies of the organization.
- That I understand that the Certificate/Diploma shall be issued only upon successful completion of the programme and fulfillment of all academic,

attendance, examination, administrative, and financial requirements prescribed by the organization.

- That I understand and acknowledge that the organization has not made any promise regarding any job.
- That I shall not hold the organization, its management, faculty, representatives, franchisees, study centres, associates, or any affiliated persons responsible for any misunderstanding regarding the nature of the programme, certification, recognition, employment opportunities, admission to other institutions, or further educational use of the programme.
- That this declaration is made by me voluntarily and without any force, pressure, inducement, misrepresentation, or undue influence.
- That this declaration is made by me voluntarily and without any force, pressure, inducement, misrepresentation, or undue influence.

PARENTS/ GUARDIANS (IN CASE OF MINOR)

Name: _____

Aadhar No.: _____

Mobile No.: _____

Signature: _____

WITNESS

Name: _____

Aadhar No.: _____

Mobile No.: _____

Signature: _____

DEPONENT

Signature: _____

Name: _____

Date: _____

Mobile No.: _____

VERIFICATION

I, the above-named deponent, do 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 therefrom.

Verified at _____ on this _____ day of _____, 20____

DEPONENT

Signature: _____