## KARNAVATI UNIVERSITY

# **ANNEXURES**

The following list of documents in the Annexures will be required to be submitted by the student seeking admission at the time of admission in the Karnavati University:

Annexures	List				
Annexure A	Undertaking regarding the adherence of rules and regulations of the				
	University to be signed by the student and Parent/Guardian				
Annexure B	Undertaking regarding Anti-ragging to be signed by student and				
	Parent/Guardian - (To be filled online at www.antiragging.in)				
Annexure C	Hostel Undertaking by Student and Parent/ Guardian (To be filled by				
	students availing hostel accommodation facilities)				
Annexure D	Indemnity bond to be signed by the Student and Parent/Guardian				
Annexure E	Certificate of Medical fitness of the student				

#### UNDERTAKING BY THE STUDENT AND PARENT/GUARDIAN

				Da	ite:	
I,	the	undersigned,	aged	vears.	child/ward Residing	of at
		, ac	dmitted in	years,	Residing	, a
cons	stituent ins	stitute of Karnavati	University (hereinafter re	ferred to as "Ur	niversity"), Uva	rsad,
Gan	dhinagar,	do hereby solemnly	y affirm and undertake tha	at:		

- 1. All information and documents submitted to the University in the Application form(s) or otherwise in any manner, is complete, authentic, factually correct and to the best of my knowledge. In case it is found, at any time, that I have concealed, suppressed or distorted any information/fact, my admission with the University shall stand cancelled. Any fees or other charges already paid by me, including advance payment, security deposit shall stand forfeited.
- 2. I have read and understood all the rules, regulations and policies of the University, which are applicable on me, I accept the same and also agree to abide by all the terms and conditions enforced by the University from time to time.
- 3. I will adhere to the provisions Rules, Regulations, Ordinances of the University made thereunder, and all the further orders, Instructions, Policies, Directions as enforced from time to time by the University and its constituent Institutes, Academic Body, Board of Management, and other authorities. In case of any failure or default or ignorance on my part with regards to the adherence of the same, the University reserves the right to take any action against me and in such cases, I shall have no claim over refund of fee or otherwise against the University.
- 4. I agree that the University reserves the right to frame, amend, modify, revoke, repeal and enforce the Rules, Regulations, Policies, Guidelines, Ordinances as and when deem fit and it shall be my sole responsibility to keep myself updated with the same applicable from time to time, the University shall not be responsible for informing me separately in any manner.
- 5. The University reserves the right to introduce, alter or withdraw at any time, any program/course or facility and to revise the fees and other charges of the program/course or facility as deemed appropriate from time to time.
- 6. I shall be liable to pay for any damage caused by me to the property of the University either alone or jointly with others, apart from any disciplinary action(s) taken by the University against me.
- 7. I shall study at the University for the complete duration of the program/course and if due to any reason, I leave/withdraw at any time before the completion of program/course, I shall not be refunded any fees or other charges already paid, including security deposits, and the same shall be forfeited, and I shall be further liable to pay the fees and other charges for remaining/entire duration of the program/course.
- 8. I am medically fit to pursue and continue my program/course in the University. In case I have any severe, acute and chronic disease, including fits, any sort of attacks or any other medical condition., I shall disclose the same to the University from time to time. I agree that, in case

any expenditure is incurred by the University on my treatment for any illness or disease or personal injury or otherwise, it shall be paid/reimbursed by me or my parents/guardians.

- 9. I shall abide by the traffic and parking rules as prescribed by the University.
- 10. I understand that the use of and consumption of any addictive substance like alcohol, drugs, narcotic substances, habit forming substances, tobacco etc., is strictly prohibited in the hostel and the University. I will be held liable, if found guilty of indulging in any such activity, i.e., smoking, consuming alcohol or intoxicating substances or found under its influence at any point of time or at any place within the hostel and University premises.
- 11. In case of any dispute on any matter or for any unforeseen issues arising, that are not covered in the Prospectus, Provisional Admission Offer Letter and/or interpretation of any content, the decision of the University shall be final and binding on me and others concerned.
- 12. I agree that the courts only in Gandhinagar, Gujarat shall have the jurisdiction over all the disputes arising in relation to my admission, study and residence at the University and in respect of any other matter pertaining to the University in any respect.

Signature of Student:	Signature of Parent/Guardian			
Name:	Name:			
Email id:	Email id:			
Contact no.:	Contact no.:			
Alternate Contact no :	Alternate Contact no :			

#### **Annexure B**

### **UNDERTAKING BY THE STUDENT ON ANTI-RAGGING**

To be filled online at www.antiragging.in

#### **HOSTEL UNDERTAKING BY STUDENT AND PARENT/GUARDIAN**

(to be filled by students availing hostel accommodation facilities)

		Date
I	student of Mr/Mrs	having
enrolment no	in	(Program/course) of
	(Name of Institute) of Karnavati U	niversity, do hereby undertake
that:		

- 1. I shall abide by all the rules as mentioned under the *Student Hostel Accommodation Policy* of the University and such other rules as informed from time to time. I shall maintain discipline and decorum of the Hostel. I shall follow the code of conduct of the hostel. I shall treat the hostel staff with due courtesy. I will follow the Standard operating procedure as intimated from time to time.
- 2. I understand that the use of and consumption of any addictive substance like alcohol, drugs, narcotic substances, habit forming substances, tobacco etc., is strictly prohibited in the hostel and the University. I will be held liable, if found guilty of indulging in any such activity, i.e., smoking, consuming alcohol or intoxicating substances or found under its influence at any point of time or at any place within the hostel and University premises.
- 3. I am aware and understand that ragging, harassment (including sexual harassment), violence, causing nuisance and gambling activities are strictly prohibited and constitutes to an offence. Any involvement in the same will lead to penal action against me.
- 4. I agree to abide by the hostel timings at all times and shall not violate the timings. I understand that prior permission is required for leaving the hostel for going outside the campus, I will solely be responsible for my own safety and protection when not in the hostel premises. I will report to the hostel on the said time and date for which the prior permission was taken. If found violating the hostel entry and exit rules I will be liable to disciplinary action.
- 5. I understand that guests, outsiders and visitors are not allowed inside the hostel, I shall abide by this rule, if found violating I will be held liable and disciplinary action may be taken against me. I understand that prior permission is required for meeting the parents/guardians in the hostel premises.
- 6. I understand that availing mess facility is mandatory for the occupants of the Hostel at the University. Hence, I agree to avail the mess facility and pay the annual mess fee from time to time. I also understand and agree that the hostel and mess fee, once paid, is non-refundable, in any circumstances.
- 7. I will not consume any non-vegetarian food in the hostel and University premises. I shall strive to keep the hostel premises and my room neat and clean.

- 8. I shall preserve and safeguard the hostel property, I will not knowingly or otherwise, destroy, damage or destruct any property of the hostel, or of the fellow students residing at the hostel. I shall be held responsible for any damage or loss caused or property stolen, if found guilty.
- 9. I shall be responsible for the safe-keeping of my belongings and valuables, and in case, if any of my belongings or valuables are misplaced, broken, damaged, stolen or destroyed, I will not hold the hostel administration/ authorities or the wardens responsible for the same.
- 10. I shall ensure that all the dues, including hostel fees, mess fees, fines and penalties that may have been imposed on me, are paid on time.
- 11. I shall, on such date as notified by the Hostel administration Committee, vacate the room and remove all my belongings and valuables. In case I fail to vacate the room and remove my belongings and valuables, I understand that the Hostel administration/authorities reserve the right to remove my belongings and valuables and take possession of the room, I shall not hold the hostel administration/ authorities responsible or liable in any manner for any loss or damage to such belongings and valuables.
- 12. I shall at all-time abide by the rules and regulations of the Hostel as set out by the University. I understand that if I am found violating any rules or any instructions at any time, I will be dealt as per the decision of the Disciplinary Committee and the Hostel Administration Committee. The University and the Hostel reserves the right to cancel my admission if found necessary at any time, without any cause of action arising against it.

I undertake to abide by all the rules and regulations of the hostel.

Date:		
Place:	(Signature of Student)	
Ι	Parent/Guardian	of
	undertake that my child/ward shall abide	by all
the rules and regulations of the l	hostel and I shall not hold the hostel administration or wa	ardens
responsible for any loss or harm	a caused to my child/ward on his/her own cause.	
Date:		
Place:	(Signature of Parent/Guard	lian)

Contact Details of student:	Contact Details of Parent/Guardian:		
Name:	Name:		
Email id:	Email id:		
Contact no.:	Contact no.:		
Alternate Contact no.:	Alternate Contact no.:		

#### **Annexure D**

Date.....

# **Indemnification Undertaking by Student and Parent/Guardian**

	I	the	undersigned,					child/ward	of
			itutes, affiliates, s her units, as applic	spons	oring bo	-		University and ies, successors, si	
l.	All actions, causes, suits, proceedings (including civil and criminal), accounts, claims, liabilities (including statutory liabilities), penalties, demands and costs including legal costs, awards, damages, losses and expenses whatsoever, arising on account of my action or inaction or otherwise during the duration on my program/course at the University or thereafter and against all consequences arising thereof;						osts, tion		
2.	compelloss of manner tours, the Ut loss of	ensation for damage er due to a conduct on the conduct of the cond	claims by myself, or any mishappening of any kind cause any reason, including practical, working transport or otherwoof cash or valuable and	ng in d to ng bu ng in vise v	terms of me in pe ut not lin laborator within or	death, suici erson or othenited to indu- ries or works outside the	de, disability rwise at any strial visits, shops, stay in University	y, infections, disea y point of time in trainings, internsh h hostels, travellin premises, and for	any nips, g in any
3.	Under	taking gi	uences arising, in ven to the Univers I the University sh	ity; a	ind I my	self shall be	responsible		
	Place:								
	Signat	ture of Stu	ıdent			Name and	Signature o	f Parent/Guardian	=

### MEDICAL FITNESS CERTIFICATE

TO BE FILLED IN BLOCK LETTERS

Date:
1. Name:
2. Father's Name:
3. Blood group:
4. Mark of Identifications:
5. A. Height: (cm) B. Weight: (Kg.) C. BMI:
6. Disability Full/Partial (if any):
7. History of any illness and or Diseases (physical or mental, if any):
8. Ongoing Prescribed Medications/Drugs with supporting evidences (please specify):
8. Undergone any surgery in the past (if any):
9. Allergies (if any):
10. Any other Remarks:
DECLARATION BY STUDENT:
The information provided above by me is correct and true to the best of my knowledge. I am medically (physically and mentally) fit to pursue and continue my program/course in the University. In case, at any time in the future there is any change in my medical condition, I shall inform the University about the same. I shall not hold liable the University for any harm incurred to me due to non-disclosure of any information hereinabove.
Signature of the Candidate:
Signature of the Parent/Guardian:
Date: