

SWORN AFFIDAVIT

(Submitted by the Sponsor of the candidate seeking admission under NRI quota in MBBS/BDS/PG Medical/PG Dental courses-2024 as per G.O.(Rt)1616/2024/H&FWD dated 04.07.2024)

I, (Name of the Sponsor)
residing at
. (Address of the Sponsor) being the sponsor of
. (Name of the candidate) bearing NEET
Roll no..... and *MBBS/BDS/PG Medical/PG Dental
Application No..... hereby undertake that my visa
expired/expiring on..... and I will produce the valid renewed
visa/acknowledgement as per G.O.(Rt)1616/2024/H&FWD dated 04.07.2024 on or
before the last date fixed by the Commissioner for Entrance Examinations for
option registration for the third allotment to the *MBBS/BDS/PG medical/PG
Dental courses.

I understand that in case of failing to produce the valid document within the stipulated time, the candidature of the applicant to the NRI quota seats and the allotment received , if any , in NRI quota seats in *MBBS/BDS/PG Medical/PG Dental courses will be cancelled.

The declaration given herein is true and correct to the best of my knowledge and belief.

Signature:

Name:

Date :

Place:

* Strikeout whichever is not applicable.