Undertaking B

## (TO BE TYPED ON NON JUDICIAL STAMP PAPER OF RUPEES FIVE HUNDRED & SUBMITTED TO MGMIHS AFTER DULY NOTORIZED)

## **AFFIDAVIT**

l,	_
father / mother of	
do hereby solemnly affirm and state that I am aware about the documents submitted by my so	n .
daughter / ward: Mr./Mrs./Ms	_
for seeking admission forcou	rse
of MGM Institute of Health Sciences. I further state that I have seen these original docume	nts
and they are genuine. In case of any doubt / dispute arising about the authenticity of the sa	aid
original documents my son / daughter / ward: Mr. / Mrs.	
Ms shall be liable for appropriate action includi	
cancellation of his / her admission from course of t	he
MGM Institute of Health Sciences. I as well as my son / daughter / was	
Mr./Mrs./Ms shall also be responsible	le
for any action initiated by the MGM Institute of health Sciences for falsity / doubt of the sa	
document/s submitted by my son / daughter / ward to the MGM Institute of Health Science	es,
Navi Mumbai. We shall have no claim of whatever nature against the MGM Institute of Hea	th
Sciences. In case his / her admission is cancelled because of fraudulent practices, I undertake	to
pay the entire fee for the course of study.	
Solemnly affirmed at:	
On this: day of2023	
Deponent: (Signature of Students' Father / Mother):	
(Name of Student's Father / Mother):	
dentified by me:	