FHRAI INSTITUTE OF HOSPITALITY MANAGEMENT, GREATER NOIDA
ANTI-RAGGING FORM & ANNEXURES

ANNEXURE I

AFFIDAVIT BY THE STUDENT

I, (full name of student with admission/registration/enrolment number) .....
.....
S/o D/o Mr./Mrs./Ms… ....,
having been admitted to (name of the institution)… ....,
have received a copy of the NCHM Regulations on Curbing the Menace of Ragging in Hospitality Educational Institutions, affiliated to it, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that
   a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
   b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or anylaw for the time being in force.

6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this ……day of ……month of…..... year.

Signature of deponent
Name :

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at (place)….....….on this the (day)…….....of (month)…...…….(year).....

Signature of deponent

Solemnly affirmed and signed in my presence on this the (day)…...of (month).....(year)…… after reading the contents of this affidavit.

OATH COMMISSIONER

AFFIDAVIT BY PARENT /GUARDIAN

I, Mr./Mrs./Ms……..…….....……
(full name of parent/guardian)father/mother/guardian of (full name of student with admission / registration / enrolment number ...., having been admitted to (name of the institution) ....., have received a copy of the NCHMCT Regulations on Curbing the Menace of Ragging in Hospitality Educational Institutions, affiliated to NCHMCT, (hereinafter called the "Regulations"), carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and clause 9.1 Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that
   a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
   b) My ward will not participate in or abet or propagate through any act of commission or omission that maybe constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against myward under any penal law or any law for the time being in force.

6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this ……day of ……month of…..... year.

Signature of deponent
Name:
Address:
Telephone/Mobile No.:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at (place)….....….on this the (day)…….....of (month)…..…….(year).....

Signature of deponent

Solemnly affirmed and signed in my presence on this the (day)…...of (month).....(year)…… after reading the contents of this affidavit.