ATTENDANCE AFFIDAVIT

ger	S/D/W/o age nder resident of hereby te that:
	I am well aware of the attendance and internal marks assessment policy defined by University & NMC/MCI. I here undertake that I will attend all the classes from the opening day of the College and I will be regular and punctual in all scheduled classes i.e. (Theory/Practical/Clinical Postings). I am also aware that if I don't secure minimum attendance and minimum internal marks as per norms laid down by University & NMC/MCI, I shall be detained and will not be allowed to appear for the University Examination.
Da	te:
Pla	ce: Signature of Student
Pla	ce: Signature of Student ACKNOWLEDGEMENT BY PARENTS / GUARDIAN
I, . Fat of thre	
I, . Fat of thre	ACKNOWLEDGEMENT BY PARENTS / GUARDIAN S/o, D/o her/Mother/Guardian of gender resident carefully gone ough the terms of the above undertaking and understand that if he/she fails to comply with the attendance es he/she will be detained and will not be allowed to appear for the University Examination.