

(To be furnished on a PKR 100/- stamp paper at the time of admission)

UNDERTAKING / BEYAN-E-HALFI
(COMPLIANCE TO ONIMS RULES & REGULATIONS AND
CODE OF ETHICS & CONDUCT)

I, _____ Son/Daughter of _____, bearing CNIC / B-Form / Passport No. _____ admitted in _____ program at College / Department of _____ **Obaid Noor Institute of Medical Sciences (ONIMS), Mianwali**, am submitting this undertaking as per the admissions requirements of the program. I hereby solemnly declare that during my stay at the Institute, I shall abide by the following:

- a. I shall abide by all the rules and regulations enforced at ONIMS at present and those which may be enforced at any time in the future and strictly conform to the code of conduct for the students of ONIMS.
- b. I shall diligently apply myself to acquire the knowledge and develop the skills necessary for the practice and advancement of the field of study in which I am enrolled.
- c. I shall be respectful towards my fellow students, teachers and employees of the Institute.
- d. I shall fully abide by the decisions of the competent authorities / committees constituted for the purpose of ensuring and enforcing discipline and good order in the Institute.
- e. I shall not indulge in any political, terrorist, anti-state or anti-social activities or the activities against the cultural and social norms of the community, religious activities inciting aggression and terror, raging activities or any racist activity.
- f. I shall protect and preserve the property of ONIMS at all times and shall make all efforts to prevent others from causing any damage or destruction to the Institute's property.
- g. I shall pay all my dues/fee as applicable from time to time and as may be prescribed, failing which I shall be liable for penalty as per policy of the Institute.
- h. I shall strictly abide by the attendance policy of the institute prescribed for a specific program of studies being offered in ONIMS. In case of non-compliance to the attendance policy, the institute reserves the right to struck me off from the rolls of the classes or forbid me to appear in the examinations.
- i. I shall not remain absent from teaching programs without prior permission of the institute authorities.
- j. I shall not challenge the results and exam policies of ONIMS and affiliated University except as allowed by the exam regulations for the rechecking/recounting purpose.
- k. I fully understand that if I fail to clear the relevant subjects in fixed attempts or having lower CGPA than the required for maintenance of admission in ONIMS, I shall cease to be eligible for further Education in this institution.
- l. In case, at any time after the execution of this Affidavit, it is revealed or discovered by the Institute that relevant copies of the certificates/testimonials in lieu of the originals submitted to the Institute or original documents presented for verification, are found to be invalid, fake and/or forged, the Institute reserves the right to take any disciplinary action including termination of my admission with immediate effect and/or any other action as may deem fit to the Institute.
- m. If I am found involved in violations of the above terms and conditions at any stage during my stay at ONIMS and all such acts and deeds, whether inside or outside the institute and its

premises, that might bring disgrace and badname to the Institute, the Institute shall have the right to cancel my admission without further notice.

- **I hereby assure that my ward shall abide by all the Academic Regulations of the program and the Institute, and undertake that my ward and I have been well informed about the aforementioned regulations. We would therefore remain in regular contact with the Student Affairs Office / College / Department administration for counseling and academic progress of the student.**
- **In case of non-compliance and violation of aforementioned points, I shall be liable to appropriate punishments and penalties as per approved policies of the ONIMS and University with which ONIMS is affiliated.**

Student Name: _____

Parent/Guardian Name: _____

Student Signature: _____

Parent/Guardian Signature: _____

Date: _____

(Attach a copy of Father/Guardian's CNIC)

Witness I

Signature: _____

Name: _____

CNIC No.: _____

Date: _____

Witness II

Signature: _____

Name: _____

CNIC No.: _____

Date: _____