

DECLARATION

1. I, the undersigned, a student of Amala Institute of Medical Sciences, Amala Nagar, Thrissur, hereby agree with the Director/Asso. Director/Principal, his successors and assignees to conform from this date to the rules and regulations including those relating to the Hostel, (if I am admitted thereto) laid down or to be laid down hereinafter by the Director/Asso. Director or the Principal for the time being of the Amala Institute of Medical Sciences for the due maintenance of discipline at the said Amala Institute of Medical Sciences.
2. I further agree with the said Director/Asso. Director/Principal, his successors and assignees to make good when called upon to do so to the Amala Institute of Medical Sciences any damage to furniture, apparatus or other things which may be caused by any carelessness, negligence or wantonness on my part.
3. I further agree that in case it is found that I have secured admission by adopting or resorting to fraudulent means, my admission will be cancelled and my name will be removed from the rolls.
4. In witness whereof I have hereunto set my hands on this day of 2025.

Signature of Student

Signed by the above named in the presence of

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(Name & Signature of Parent or Guardian with date)

Address of Parent / Guardian

Occupation:

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Telephone No.: