VYDEHI INSTITUTE OF NURSING SCIENCES & RESEARCH CENTRE #82, EPIP Area, Whitefield, Bangalore 560 066

SPECIAL INSTRUCTIONS REGARDING RAGGING

The students of Vydehi Institute of Nursing Sciences & Research Centre are hereby informed that "RAGGING" in any form is strictly prohibited. It is needless to explain about harassment, humiliation and sufferings to which new entrants would be subjected in the name of "RAGGING" which is inhuman and intolerable. The management enforces strict discipline among the students of the college and the management is very much interested that the college will be the model institution free from ragging. The students are therefore strictly warned to refrain from involving in any ragging activities. Those who involve in ragging in any form shall be expelled immediately from the College and Hostel, and they are liable for punishment as per Government Order of Karnataka State. Ragging is cognizable offence which will attract a fine of Rs. 25,000/-, imprisonment for three years & will be expelled from the college immediately

DECLARATION OF THE STUDENT

- 1. I have received a copy of college disciplinary rules and I declare that I will abide by them strictly.
- ı mates I

2.	If I experience any kind of misbehavior or ragging from seniors or batch ma
	will notify the Authorities and my Parent immediately.
	Signature of the Candidate
	Signature in my presence
Place	Signature of the Parent/Guardian
Date	

VYDEHI INSTITUTE OF NURSING SCIENCES AND RESEARCH CENTER #82 EPIP Area, Nallurahalli, Whitefield, Bengaluru – 560066

UNDERTAKING BY PARENT/GUARDIAN

1.	I		[F/o. M/o.	G/o.			
	[GNM/B.Sc (N	N)/PBB.Sc (N)/M.Sc (N))]		nave carefully	y read and	fully
	understood the	law prohibiting ragging and	d the direction	ns of the H	Hon'ble Supre	eme Court ar	nd the
	Central/State G	overnment in this regard a	s well as the J	NC regula	tions on curb	ing the mena	ace of
	Ragging in Higher Educational Institutions 2009.						
2.	I assure you that my son/daughter/ward will not indulge in any act of ragging.						
3.	3. I hereby agree that if he/she is found guilty of any aspect of ragging, he/she may be punished a						as per
	the provisional of the INC regulations mentioned above and/or as per the law in force						
Signed	I this	day of	mon	th of	year		
	Signature						
		Address, Phone no. & Mobil No					
	& Address:						
	Witness:						

(A copy is also available on the website www.vims.ac.in)

VYDEHI INSTITUTE OF NURSING SCIENCES AND RESEARCH CENTER # 82 EPIP Area, Nallurahalli, Whitefield, Bengaluru – 560066

UNDERTAKING BY CANDIDATE/STUDENT (NURSING)

1.	I[GNM/B.Sc (N)/PBB.Sc (N)/M.Sc (N)] S/o. D/				
	of Mr./Mrs.Ms		have carefully		
	read and fully understood the law prob	nibiting ragging and the dire	ections of the Hon'ble Supreme		
	Court and the Central/State Government	nt in this regard.			
2.	I have received a copy of the INC regulations on curbing the menace of Ragging in Higher				
	Educational Institutions 2009.				
3.	I hereby undertake that				
	- I will not indulge in any behavior or act that may come under the definition of ragging.				
	- I will not participate in or abet or propagate ragging in any form				
	- I will not hurt anyone physically or p	osychologically or cause any o	other harm		
4.	I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions				
	of the INC regulations mentioned above and/or as per the law in force.				
Signed	this day of	month of	year		
		Signa	h		
		Signa	tuie		
		Addre	ss		
	& Address:				
	Witness: Witness				

(A copy is also available on the website www.vims.ac.in)

VYDEHI INSTITUTE OF NURSING SCIENCES AND RESEARCH CENTER # 82 EPIP Area, Nallurahalli, Whitefield, Bengaluru – 560066

	Date:
	DECLARATION
I Mr/Mrs.	of
	(address) Parent/Local guardian
of the student Mr/Miss/Mrs.	studying in [GNM/B.Sc (N)/PBB.Sc (N)/M.Sc
	te of Nursing Sciences & Research Center. Declare that my
son/daughter/ward	would not indulge in any activity of causing harm to any
	other person/s or self who are staying/residing on
permanent/temporarybasis in the campus	 college, hostels, hospitals and other allied centres/units.
Parent/local guar son/daughter/ward. And in such a situati	·
	Signature of Parent/Local guardian
	Name
	Address
Name & Address:	

Witness:
 Witness