

TO BE SUBMITTED ALONG WITH THE APPLICATION OR AT THE TIME OF ADMISSION

ANNEXURE-A

To be typed on NON-JUDICIAL
STAMP PAPER OF 50/-

PG COURSES
To be submitted in original
alongwith application form

Affidavit

I.....
son/daughter/wife of Sh..... and
permanent resident of.....
am applying for the PG courses-2024 and in the event of my selection as a Resident/culture
cum-PG student, I do hereby solemnly declare and affirm as under :

1. That it is within my knowledge that this is a tenure job for a maximum period of three years and that my present appointment will primarily be only for a period of one year after joining.
2. That I may be given an extension for a period of one year and further extension for another year after having been assessed by the Head of the Department/Dean Academics every year. The course may be extended, if my performance is not satisfactory, as certified by the Head of the Department/Dean Academics/Principal. The extension will be at the sole discretion of Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala and shall have to be in writing against an application to be submitted by me.
3. That I shall be receiving the stipend as per rules laid down for the purpose. After the end of the initial prescribed period, the stipend will be paid to me only if extension as per clause (2) has been obtained and submitted to the Accounts Department.
4. That I shall not make any demand directly or indirectly or join any other individual or group of individuals for raising any demand for any increase in the stipend during the entire period of my service with Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala, irrespective of what the other institutions or the Govt. is paying to such of the doctors.
5. That I shall abide by all the rules and regulations governing my assignments as may be made applicable by the authorities from time to time and that I shall obediently perform all the duties assigned to me.
6. That I shall neither go on strike myself nor join any other class indulging in a strike and shall never neglect/abandon my duty towards the patients under any circumstance.

7. I shall ensure that all the documentation in files including consents and plan of care is properly maintained.
8. That in case, any deficiency, in rendering service to the patients, during the course of my duty, is found or the same is held to be so by any other Forum or Commission then, in that case, I alone shall be responsible for all kinds of damages.
9. That I am fully aware that I am not allowed to do any kind of private practice at home or elsewhere, free or for a consideration and I therefore furnish the undertaking as under:-
 - i. That I shall not do any kind of private practice/give consultations/do operations at home or elsewhere, free or for any consideration, in my own name or in the name of my spouse or any relation or anybody else in any form whatsoever.
 - ii. That I shall not associate myself in any manner with anybody including my spouse and relations etc.) for doing any kind of private practice or giving any consultations in any form whatsoever.
 - iii. That I shall not visit any other hospital, Nursing Home or Clinic etc. for the purpose of examining patients or carrying out any type of surgery or investigative, diagnostic or therapeutic work.
 - iv. That in the event my spouse, if he/she is fully qualified in the field of Medical Sciences and is not an employee of GSMC & Hospital, Ram Nagar, Rajpura, wishes to do private practice, undertake to apply to the management of this institution, seeking their written permission for my spouse to do private practice at his/her clinic without which my spouse shall not engage himself/herself in any kind of private practice. In the event, my spouse is not qualified for the job, he/she shall not engage himself/ herself directly or indirectly in any kind of private practice in the field of medical sciences. It shall be my responsibility to secure compliance of these provisions.
 - v. That I shall not, in any way, provide any assistance directly or indirectly to my spouse for carrying out any kind of private practice.
 - vi. That my selection, appointment and continuation in training/service is always subject to my observing all the clauses of this affidavit to the entire satisfaction of the management of Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala.
 - vii. That violation or non-observance by me of any of the aforesaid clause(s) shall be construed as mis-conduct and the Management shall be at liberty to terminate my services or take any such action against me as may be deemed proper by them to which I shall have neither any objection nor shall I make any claim against them. Management's decision in this regard shall be final and binding on me.

10. That I shall complete my tenure of three years and work for the entire period in the speciality in which I am initially admitted. I shall not appear in any of the subsequent PG Entrance tests. In case I "discontinue" my course under any circumstance, I shall pay a sum of 2,00,000 (Rupees two lac only) as damages in addition to the annual tuition and other fees, Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala.
11. That as per university norms, I will be allowed only 20 leaves per annum, which includes leaves for conferences, CMEs and conventions etc? Under no circumstances the leaves of consecutive year will be clubbed or carried forward. In case I take leaves more than 20 leaves per annum, my course shall automatically be extended and I shall not be entitled for any stipend for the extended period of my course.\
12. That my admission to the PG Course is at my own risk & responsibility. I clearly understand that after my admission, if I am required to vacate my seat because of any reason, including orders/decision of any court/University/NMC or the Govt, I shall vacate my seat immediately and I shall not claim any kind of damages compensation etc. from Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala. or its Management for vacating my seat.
13. That in the event of my selection, I shall submit a bank guarantee Surety bond against my balance tuition fee in the prescribed form as given in Appendix C|C1 before joining the course.
14. That in case I leave the course in between on account of any reason, I shall pay the entire balance Tuition fees and other dues.
15. That I shall be available at the campus all the 24 hours (day and night) and attend to all the emergencies and any such other work as I may be required to do by the authorities.
16. That I will be required to stay in the hostel provided for the purpose by the Management of Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala, on the terms and conditions as outlined below and I undertake to abide by the same in letter and spirit.
17. That the accommodation allowed to me by the authorities of GSMCH shall always be maintained by me to the satisfaction of the authorities and I shall stop using the same at the end of the 3 years of my Postgraduation period or earlier, if the said Job/Admission is terminated/cancelled under any circumstances. During the period extended beyond three years if any, under any circumstances, I promise to stop using the said accommodation and my failure to do so shall entail damages @ 200/- per day which the authorities can recover from me and my stipend mentioned herein. In case any damage is found to have happened to anything in my room, then I shall be fully liable for all the losses arising therefrom and the same shall be recoverable from me.
18. That I shall not use any gadgets like Electric Press, Heater, Stove, Mixie in the room (s) allotted to me for my residence without written permission of the authorities.
19. That I shall not use any gadgets like Electric Press, Heater, Stove, Mixie in the room (s) allotted to me for my residence without written permission of the authorities.
20. That I shall complete all the requirements as stipulated in the provisional appointment letter failing which I shall, forthwith vacate the accommodation allowed to me.

21. That I shall not allow any person to enter my room and stay with me for the night. In case of any violation of this undertaking by me, I fully understand that I shall have to pay a fine of 500/- per night to GSMCH besides being liable to a disciplinary action to be taken by the authorities.
22. That in the event I have a friend or a relative etc. whom I want to take into my room, then I shall have all the necessary entries made in the register kept for the purpose at the main entrance of the hostel complex as per the directions given from time to time.
23. That I shall not consume nor shall I allow any other person to consume any liquor, tobacco or other intoxicants in any room or at the premises of DMCH under any circumstances.
24. That I shall not store and let there be stored any type of alcoholic drinks or intoxicating drugs etc. in my room.
25. 25. That I shall neither keep nor allow any body else to keep any kind of firearms (licensed or unlicensed) or any sharp-edged weapon in my room.
26. That, under all circumstances, I shall meticulously follow the discipline and directions concerning my residence at the campus of GSMCH and the directions and guidelines pertaining to my duties at GSMCH.
27. That in the event, the authorities find that I have violated any of the above conditions, I shall have no objection to submit to the decision of the authorities of GSMCH in the matter which may include cancellation of my post-graduation, suspension from service and finally termination thereof. The decision of the authorities of GSMCH shall be final and shall not be questioned by me in any court of Law.

DEPONENT

VERIFICATION

I, the above-named deponent, do hereby further solemnly declare and affirm that the above statement of mine true and correct to the best of my knowledge and belief and nothing has been kept concealed therein.

DEPONENT

Verified at _____ on _____

(TO BE ATTESTED BY NOTARY PUBLIC)

ANNEXURE-B

To be typed on NON-JUDICIAL
STAMP PAPER OF 50/-

Affidavit

I
son/daughter/wife of Sh.
and permanent resident of.....
do hereby solemnly declare and affirm as under :

1. That the terms and conditions of Admission Notice are accepted.
2. That I have not been debarred for doing PG Courses previously.
3. That I am a citizen of India.
4. That I have not obtained of the benefit of residence in any State other than Punjab.
5. That I have not joined any Govt./ Semi Govt./ Private Service.
6. That I have not joined/ am not doing any Postgraduate course at any other Medical Institute/ College in India/ abroad.
7. That I shall appear in the Degree after successful completion of the mandatory training period which is 36 months for MD/MS courses (including the period of Examination).

DEPONENT

VERIFICATION

I, the above-named deponent, do hereby further solemnly declare and affirm that the above statement of mine true and correct to the best of my knowledge and belief and nothing has been kept concealed therein.

DEPONENT

Verified at _____ on _____

(TO BE ATTESTED BY NOTARY PUBLIC)

ANNEXURE C

To be typed on NON-JUDICIAL
STAMP PAPER OF 50/-

Bank Guarantee

1. We the _____ Undertake to pay the amount of Gian Sagar Medical College and Hospital, Ram Nagar, Rajpura, Patiala, without any demur, merely on demand by the Principal, any objection on account as balance fee of Dr _____ S/o. _____ R/o _____ The liability under this guarantee shall be restricted to an amount not exceeding.
2. We are liable to pay guaranteed amount if a written claim or demand is served upon us by the Principal, GSMCH, Ram Nagar, Rajpura, Patiala.
3. The beneficiary should see confirmation of issuance of the guarantee from controlling office of issuing branch, which is situated at _____.
4. We _____ undertake not to revoke this guarantee during its currency except with the previous consent of the Principal, GSMCH, Ram Nagar, Rajpura, Patiala.
5. Notwithstanding anything contained herein above our liability under this guarantee is restricted to _____ and shall be relieved discharged of all liabilities under _____ this guarantee after (Date of expiry).
6. Notwithstanding herein above stated, our liability under the guarantee is limited to _____ (Rupees _____) and a written claim arising out of the guarantee is must be lodged with the bank on or before after which _____ (Date of expiry) liability of the bank would be extinguished.

Date: _____

For _____

Signature: _____

ANNEXURE- C 1

To be typed on Stamp Paper
of 100/- and attested by
Notary Public

SURETY BOND

Know all men by these present, I, Mr./Mrs _____

_____ S/O/O Sh _____ Gali/Ward No. _____
Area _____ city (here-in-after called the surety)
and Mr. _____ S/O/D/O _____ (Here-in-after called
the student) firmly bind ourselves, jointly and severally unto Gian Sagar Medical College & Hospital, Ram Nagar,
Rajpura, Patiala through its Principal (here-in-after called the College) for a sum Rs.

(in words) Rs. _____ to be paid to the said College or their representative, or
assignees, being the balance tuition fee for P.G. course undertaken by the student with the college on the terms
and conditions mentioned here-in-after.

Now the terms of the above said Surety Bond are as under: -

1. That the student shall not leave the P.G. course before the completion of the course as any such act entails the loss of balance tuition fee.
2. That in case the student leaves the course before its completion and the college has to sustain a loss of fee for the remaining period then in that event, the bonded student and the surety shall be jointly and severally liable to pay the balance sum, equal to balance tuition fee of the course as damages, to the said college. However, under no circumstances the student shall be entitled to any kind of refund of the fees already paid.
3. That the liability of the student and the surety will be joint, several and co-extensive.
4. Properties (immovable) of the surety shall remain under the lien of the college. The detail of the immovable properties upon which the lien is created under this Surety Bond is as under: -

House No: _____

State: _____

Vasika No: _____

Ward No: _____

Tehsil & Distt: _____

Khasra No. if any _____

& the date of registration of said vasika

Registered with _____

5. That the surety also undertakes that he will not alienate create any charge, or in any way deal with the property mentioned above before the fulfillment of the terms and conditions of this bond.
6. Notwithstanding anything herein before contained, it is hereby mutually agreed and declare that I _____(Surety) will not be empowered to terminate my surety in any manner and this bond shall continue and shall be valid in all respects as mentioned herein above.
7. That this Surety Bond shall remain in force till the payment of final installment of tuition fee i.e. the 5" installment and on the payment of the 5" installment of tuition fee, it will automatically discharged.

We further undertook that in case of dishonour of any of the cheque on account of any reason, we will be liable for criminal prosecution under Section 138 of the Negotiable Instrument Act besides the civil liability to pay the remaining tuition fee.

IN WITNESS whereof, we have hereby signed this surety bond on this _____ day of _____, 2024 at _____ in the presence of the witnesses after admitting the contents of the same to be true and correct.

Student

Surety

Witnesses:-
(Signatures with full name & address)

1. _____
2. _____

ANNEXURE D-1 UNDERTAKING BY THE STUDENT

I _____ (Full name in Block Letter) Son/ Daughter of Mr./Mrs./Ms.
_____ (Full Name in Block Letters)

admitted to the course of _____ with Admission No. _____ at Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala, affiliated to Baba Farid University of Health Science, Faridkot have received a copy of the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, (hereinafter referred to as the said regulations).

1. I have carefully read and fully understood the provisions in the said regulations.
2. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutes "ragging".
3. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby undertake that-
 - i. I will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under regulation 3 of the said regulations;
 - ii. I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulation of the said regulations;
 - iii. I will not hurt anyone physically or psychologically or cause any other harm.
5. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.
6. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed on this the _____ day of _____ month of _____ year.

Signature

Name:

Address:

Tel/Mobile No:

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

ANNEXURE- D 2
UNDERTAKING BY PARENTS/GUARDIAN OF THE STUDENT

I _____ (Full Name in Block Letters)
_____ Father/ Monther/ Guar
dian of Mr./ Mrs./ Ms. _____ (Full Name in Block Letters) admitted to the course of _____ With Admission No. _____
at Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Patiala affiliated to Baba Farid University of Health Science, Faridkot hereby Declare that I have received a copy of the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, (hereinafter referred to as the said regulations).

1. I have carefully read and fully understood the provisions in the said regulations.
2. I have particularly perused the provisions of regulations and 4 of the said regulations and have fully understood what constitutes "ragging".
3. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against my son/ daughter/ward in case he/she is found guilty of ragging abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby undertake that my son/ daughter/ward –
 - i. will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under regulations and 4 of the said regulations;
 - ii. will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulations 3 and 4 of the said regulations;
 - iii. will not hurt anyone physically or psychologically or cause any other harm.
5. I hereby agree that if my son/ daughter/ ward is found guilty of any aspect of ragging, he/ she may be punished as per the provisions of the said regulations or as per the applicable law for the time being in force.
6. I also declare that he/she has never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, his/her admission is liable to be cancelled /withdrawn.

Signed on this the _____ Day of _____ month of _____ year.

Signature

Name:

Address:

Tel/Mobile No:

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

ANNEXURE-E
CONFIDENTIAL
Behavioral Pattern Certificate

Name: _____ Father's Name: _____
Gender: _____ Class last attended: _____ Roll No: _____
Name of the Institution: _____

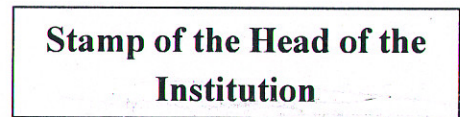
The behavioral pattern of the above-mentioned candidate is certified as under:

1. Displayed persistent violent or aggressive behavior Yes No
2. Displayed desire to harm others Yes No

If yes, Details: _____

Date: _____

Signature: _____



*The original certificate should be sent to "Principal Gian Sagar Medical College & Hospital, Ram Nagar, Rajpura, Distt. Patiala" in a sealed envelope either through Registered/ Speed post or through the Candidate.