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| C:\Users\DGL-23\Desktop\logo_50years 1.jpgC:\Users\DGL-23\Downloads\bharati logo(1).png**BHARATI VIDYAPEETH**  (Deemed to be University)  Pune, India  **MEDICAL COLLEGE, PUNE**  PUNE –SATARA ROAD, PUNE – 411 043. |

**UNDERTAKING**

I Mr./Miss \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ did not submit the following certificates in original at the time of Counselling and admission to the MBBS course, at Bharati Vidyapeeth (Deemed to be University) Medical College, Pune. I am aware that this is a mandatory requirement for the confirmation of my admission to MBBS course.

I hereby undertake that I will submit these documents within 30 days, failing which my **I MBBS result will be withheld or admission may be cancelled**.

**List of Certificates not submitted**: -

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Signature & Name of Parent/Guardian | Signature & Name of Candidate |
|  |  |
| Date: / /2023 |  |
| Place: Pune |  |