

# **AFFIDAVIT**

I Mr. /Miss \_\_\_\_\_ S/D of \_\_\_\_\_ from \_\_\_\_\_ District \_\_\_\_\_ solemnly declare that I will abide by the rules and regulations as set by the administration of College of Ophthalmology & Allied Vision Sciences, (COAVS) Lahore.

1. I will keep up 100% attendance in the classes before final examination.
2. I will attend outreach activities as and when required during the course.
3. I will pay admission & tuition fee as per Government of the Punjab decision.
4. In case of breach of course I am bound to deposit **Rs. 12000/-** (Rupees Twelve Thousand Only) per month otherwise would have to face official and legal proceedings.
5. I will observe strictly the discipline, rules & regulations related to course.
6. If found involved in any criminal act/unwanted activity/ misconduct/ violation of any rule then I would stand liable to be terminated from the course and to face the official and legal proceedings, in addition to deposit of **Rs. 12000/-** (Rupees Twelve Thousand Only) per month.
7. In all circumstances the decision of Principal/Director General COAVS, lahore will be final & binding upon me.

\_\_\_\_\_  
**DEPONENT** (Name & Signature)

**National ID Card / Domicile Reg. No.**