

[Format of affidavit to be submitted on a **Legalized/Notarized ₹200 Non Judicial Stamp Paper** by the candidate, who has been allotted a seat in **MBBS under Muslim Minority Quota by Birth** at Hamdard Institute of Medical Sciences & Research, New Delhi-62]

AFFIDAVIT

I, _____, aged _____ years,
Son/Daughter of Mr. _____ & Mrs. _____
Residing at _____ do hereby
solemnly affirm and say:

1. That I am residing at above mentioned address since _____ years.
2. **That I am a Muslim by Birth.**
3. **That I belong to Islam religion by Birth.**
3. That I belong to Muslim Minority community by birth which is included in notified Minority Communities under Section 2(c) of the National Commission for Minorities Act, 1992, Government of India.
4. That in support of my above statement, I am enclosing a copy from the following documents with the present affidavit
 - A. Muslim Minority by Birth Certificate issued by State Government or any competent statutory authority
OR
 - B. Muslim Minority by Birth Certificate (Tasdeeq Naama) issued by local religious body (Madarsa/Masjid)
OR
 - C. School Leaving Certificate of self, mentioning religion as Muslim/Islam.
OR
 - D. School Leaving Certificate of my Father/ Mother mentioning religion as Muslim/Islam.
OR
 - E. Registered Family Tree (Shijra/Shajra)
5. That I have opted for admission under Muslim Minority Quota by Birth in MBBS at Hamdard Institute of Medical Sciences & Research, New Delhi-62 during the Academic Year _____, being fully aware that by doing so I abide by all the terms and conditions defined therein.
6. That I am fully aware and agree to the fact that my admission will be cancelled if at any time & any stage in future it is found that false information has been submitted or wrongly represented by me or the documents submitted by me at the time of admission were found to be fraudulent / forged or I have made fraudulent claim of belonging to Muslim Minority Community by Birth.

Whatever stated herein above is true and genuine to the best of my knowledge and I affirmed without any undue influence, in force or coercion.

Solemnly affirmed at _____ this, _____ (date) Day of _____ Month of _____ Year.

Please paste recent colored Passport size photograph of the candidate. (Sign across & verified by Notary)	Please paste recent colored Passport size photograph of the Parent/Guardian/Husband/Wife. (Sign across & verified by Notary)
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Signature of the candidate
Name: _____
Mobile No: _____
Email ID: _____

Signature of the Parent/ Guardian
Name: _____
Mobile No: _____
Email ID: _____

(1) Witness Signature
Name: _____
Mobile No: _____
Email ID: _____

(2) Witness Signature
Name: _____
Mobile No: _____
Email ID: _____