

DECLARATION BY TEACHING STAFF ON NOTARISED AFFIDAVIT

1. I, Dr. _____ possessing Teacher Code number _____(allotted by council) joined this Institution from _____ (latest date of joining of present Institution to be mentioned) presently working as _____(designation) in the Department of _____ at _____ Ayurved/Unani/Siddha Medical College and do hereby give an undertaking that I am a full time teacher, working from _____ A.M. to _____ P.M. on working days of this Institution.

2. I have not presented myself to any other Institution in the same academic session as a faculty for the purpose of CCIM inspection. I am present in this Institution today and I further affirm that I will remain attached to this institution for full academic session (2016-17) and if I get an opportunity of job in State Govt. or Central Govt. or any other valid reason, I will approach CCIM through this Institution to get NOC (No Objection Certificate) from the Council for relieving from this College. I am aware that I will not be considered as Teacher if I join any other institution before relieving from this Institution and before getting NOC of CCIM.

3. I hereby solemnly affirm that my particulars uploaded by the Institution through Login to council is absolutely true, correct and authentic as per my record and knowledge. If any information stated in this affidavit is found to be incorrect/ false, the undersigned will be liable for necessary disciplinary action (including removal of name from State/Central Register).

Date:

Place:

SIGNATURE OF THE TEACHER

Date:

Place:

Countersigned by the
Director/Dean/Principal