## UNDERTAKING TO CONTINUE MBBS PROGRAM OF STUDIES AT SHALAMAR MEDICAL & DENTAL COLLEGE (NOT TO BE UPGRADED AS PER ORDER OF PREFERENCE)

(To be submitted on Rs.100/- Stamp Paper)

1.	I	Mr/Ms					S/D/O			,
	UHS	Challan	ID			, CNIC				
	solemnly declare that all the particulars mentioned below are TRUE and CORRECT.									
2.	2. I have been admitted in MBBS Programme at <b>SHALAMAR MEDICAL &amp; DENTAL COLLEGE</b> , <b>LAHOF</b>									ion
	2023-24 in the Merit list displayed by University of Health Sciences, Lahore and I have submitted									
	the jo	the joining form.								
3. I solemnly declare that I will continue my studies at SHALAMAR MEDICAL & DENTA								DENTAL C	OLLEGE, LAHORE a	ind
	willfu	villfully do not want to be upgraded to any other medical/dental institution as per my order of preferences								
	in the	in the subsequent upgradation lists which will be displayed by the University and want to retain my admission								
status in above mentioned medical college.										
4.	4. I solemnly declare that I fully understand that by submitting this undertaking, I am foregoing my r									
	Upgr	Jpgradation to any other Medical/Dental College mentioned in my admission form preference list and shall								
	not c	not claim for the same at any later stage.								
Name	of Ap	plicant				Signatur	e of Applican	t		_
Applio	cant's (	CNIC Nun	nber							
Eatho	r/Cua	rdian Nan	20			Cignatura	of Eathor / Cu	ıardian		
ratile	i / Guai	i ulali Mali				_ Signature (	of Father / Gu			_
Stude	nt's Co	ontact No	•		Date				Female Right Thui	_ mb

**Principal SMDC**