



UNDERTAKING FORM

FORM TO BE SIGNED BY THE STUDENT AND THE PARENT/GUARDIAN AT THE TIME OF ADMISSION TO THE INSTITUTION

(to be signed by the Guardian only in the event of both parents are not alive)

I.....(name) /daughter/son/ward of Ms/Mrs./Mr.....(name) admitted to.....(program and year) in.....(institution) during the year....., hereby agree to the following terms:

1. I understand that the possession/consumption/sale/distribution of **any** substance of abuse and/or alcohol/ is not permitted in the Institute premises.
2. I will not support or promote the possession/consumption/sale/distribution of **any** substance of abuse and/or alcohol in the Institute premises.
3. I shall cooperate with the authorities of the institution and other relevant authorities in their investigation of any substance abuse and /or alcohol-related incident of which I may have information and to prevent the possession, use, sale and distribution of any other substance abuse in or around my institution.
4. I will abide by the disciplinary guidelines of the Institute. I will not be involved in any such case leading to disciplinary action against me.

I have read the document(s) related to the disciplinary matters and the consequences of non-compliance that is available on the Student Welfare Division website. I am aware that in case, I am found involved in either promoting or consuming or possessing any such substance when I am a student of BITS Pilani, I shall be liable for appropriate action against me which may include rustication from the institute.

Name of the Student	Ms/Mr
ID of Student	
Signature	
Name Parent/Guardian:	Mrs/Ms/Mr
Email ID:	
Mobile No. of the Parent/Guardian	