

Affidavit

(Specimen of affidavit to be submitted)

I, _____ Son/Daughter of _____

Having NIC Number: _____, resident of _____

here by declare that: -

1. I have opted to return to Wah Medical College.
2. I will strictly adhere to all safety protocols and instructions issued in this regard.
3. I have provided COVID – 19 PCR and antibodies test (IgG & IgM) to the college conducted on _____
September, 2020
4. I will not hold the college liable if I contract the virus in spite of the safety protocols.
5. I understand that my failure to observe the above mentioned undertaking would result in cancellation of the permission to attend the college /utilize hostel facilities and that the decision of the Principal, WMC in this regard will be final and will not be challenged in any court of law.

Signature of Student: _____

Name of the Student: _____

Father's Name: _____

Student's NIC #: _____