

UNDERTAKING

To
The Chairman
Selection Committee UG Counselling-2010
JSS University
JSS Medical Institution Campus
SS Nagar, MYSORE-570 015

Sir,

Sub: Biometric Identification.

I Mr./Ms.....S/o/D/o..... with
JSS U Rank No..... have of my own volition attended the counselling held on
_____ at JSS Medical College, SS Nagar, Mysore-15, for admission to UG
MBBS course.

- I understand that there is a mismatch in the identification based on the biometric data provided during various entrance exam processes, counselling process, admission etc.
- I further request that I may be permitted to attend the counselling process and give me time on or before July 31st 2010 to submit proper evidence to dispel the above mismatch observed.
- I undertake and understand that in the event of my biometric identity not being confirmed for admission, my seat will be forfeited and I am liable for prosecution as per law.

Thanking you,

Yours faithfully,

Signature of the candidate

Name:

Dated:

Witness : 1.

Witness . 2.

Father's/Guardian's signature