**(on stamp paper of Rs. 100)**

**(Other patterns will NOT be accepted)**

**AFFIDAVIT**

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_S/D of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**do solemnly affirm and declare as under:-**

 **a. That I am the deponent of this undertaking and hence am fully conversant**

**with the contents of this undertaking.**

**b. That I appeared in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Examinations held in \_\_\_\_\_\_20\_\_\_ from\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Board/University and I am awaiting result (s).**

1. **The result of the same is expected to be announced by \_\_\_\_\_\_\_\_\_\_\_.**

**(Hope certificate duly signed by the Principal / Head of the College / School is attached).**

1. **That my numerical rating equvilence of O’level/ A’levels has not been issued by the respective authorities/ IBCC and National Defence University (NDU) has right to determine my provisional merit on minimum ratings of IBCC letter grades.**
2. **That the administration of National Defence University has right to cancel my admission if I fail to submit the copy of complete HSSC result/ IBCC equivalence or secure less than required percentage by 3rd October 2023.**

That the contents of this affidavit are correct to the best of my knowledge and belief and nothing has been concealed and understand that if any of the information provided by me is found to be false, my admission shall stand cancelled.I agree and accept the concerns of my admission cancellation and will not claim in any court.

**Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Deponent Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CNIC:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Deponent Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CNIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**