



Shri Aillak Pannalal Digamber Jain Pathashala's

WALCHAND INSTITUTE OF TECHNOLOGY

Seth Walchand Hirachand Marg, Ashok Chowk, Post Box No.634, SOLAPUR – 413006.

Accredited by NBA, New Delhi.

Winner of AICTE- CII Survey 2013 & 2014 Award for Best Industry – Linked Institute.

Recognized by AICTE, New Delhi and permanently affiliated to Solapur University, Solapur

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NOTICE

**(For F.E., D.S.E. & M.E. students
admitted for : 2018-2019)**

All F.E., D.S.E. & M.E.- First year students admitted for the academic year 2018-19, are hereby informed to fill Online Anti Ragging Undertaking on <https://antiragging.in>.

Before going to fill online undertaking form please go through the following instructions-

- If you do not have an E mail address please create before you fill in this form.
- If your mother or father or guardian does not have a phone or a mobile or E mail then please give the numbers or E mail of their friends or relatives or neighbors.
- If you do not have mobile number then please give the mobile number of you friend in the college.

After filling the data & Submitting form online you will get Student undertaking & Parent undertaking on your email id. The student & parent have to sign their respective undertaking & submit the same to their class coordinators.

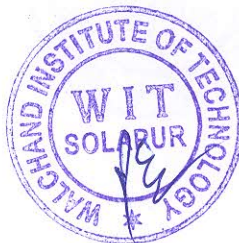
For filling online Anti-ragging Undertaking steps and Sample Filled form are displayed separately




PRINCIPAL

Steps by Step Guidelines For Filling Anti-Ragging Undertaking

1. Enter link <http://www.antiragging.in>
2. click on "Click here to download your Anti-Ragging Undertaking"
3. Fill all your personal & guardian details
4. Fill college & Course Details
for college & Course details pl. see the separate sheet attached
5. After filling all required fields, you need to click on Next Button
6. You need to check all the checkboxes then click on Submit Button
7. This Pop-up confirms that you have on line registered successfully and then you have to fill confidential survey pl. select one option for each question form.
8. This pop up confirms that you have successfully submitted the form. Click ok button this will return the home page of Anti-Ragging web portal.
9. After submitting the Anti-Raging form online the survey confirmation and Student & Parent undertaking will be sent to respective email Id.



UNDERTAKING BY PARENT/GUARDIAN

1. I, _____ father/mother/guardian of, _____, having been admitted to WALCHAND INSTITUTE OF TECHNOLOGY, SOLAPUR, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the Regulations), carefully read and fully understood the provisions contained in the said Regulations.
2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations. My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
6. I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared on _____
Signature of deponent

Name : _____

Address : _____

VERIFICATION

Verified that the contents of this undertaking are true to the best of my knowledge and no part of the undertaking is false and nothing has been concealed or misstated therein.

Verified at _____ on _____

Signature of deponent

