UNDERTAKING

I,	, S	S/D of	of
		, P.O	
P.S	, Dist	have the	honour to
undertake that I shall	be responsible for the wron	ng data/information in connect	ion with my
Date of Birth in Birth	Certificate, AADHAAR, P	AN or HSLC Admit Card; wro	ong spelling
of my name, my fathe	er's/mother's name; register	ring invalid Mobile Number ar	nd Email ID
or any other data/info	ormation I submitted throug	gh online and to the College o	ffice during
the time of my admiss	sion to HS / FYUGP 1st Year	r Class at Bilasipara College for	r the session
2025-26.			
Further, I solen	nnly declare and affirm that	t I shall not claim on anything	wrong that I
submitted to your off	ice.		
		Yours fait	hfully,
		(Signature of t	ha Studant)
Date ·		· •	,
Date: Place:		Class:	
Place:		Mobile No	