

## *Govt. of Bihar* MUZAFFARPUR INSTITUTE OF TECHNOLOGY MUZAFFARPUR - 842003

(Under the Department of Science & Technology Gout. of Bihar, Patua)

Notice No.: Acad 25 / Muzaffarpur

dated: 05/02/2019

### **NOTICE**

All students of B. Tech 2017 Batch and 2018 Batch are hereby informed that their classes for next semester are starting from 06 Feb 2019. They should follow their classes strictly as per schedule.

All students have to submit undertaking in their respective department regarding fulfillment of attendance as per AKU norms, the format for which is attached herewith.

Sd/-Registrar M.I.T Muzaffarpur

Copy to:- For information & necessary action 1) Principal, M.I.T Muzaffarpur 2) P/I (I-Way Lab), M.I.T Muzaffarpur



### *Govt. of Bihar* MUZAFFARPUR INSTITUTE OF TECHNOLOGY MUZAFFARPUR - 842003

(Under the Department of Science & Technology Gout. of Bihar, Patna)

#### **UNDERTAKING/DECLARATION FROM THE STUDENT**

I Mr. /Miss \_\_\_\_\_College Roll No. \_\_\_\_\_student of Muzaffarpur Institute of Technology, Muzaffarpur, do hereby undertake on this \_\_\_\_\_day \_\_\_\_date \_\_\_\_\_month \_\_\_\_year the following:-

1) I understand that 75% attendance in classes is compulsory and I commit myself to adhere to the same. I also understand, in case my attendance falls short, Institute may take punitive action against me, as may be deemed fit and proper.

Date:	
Place:	

Signature of student Name of student-\_\_\_\_\_ Local Address-\_\_\_\_\_ Contact No.\_\_\_\_\_

# **DECLARATION BY PARENT/GUARDIAN**

father/mother of			am aware, that as per Aryabhatta			
Knowledge University, P	atna rules.	, my	ward has to	o attain a m	inimum o	f 75%
attendance during each se	mester of	conc	cerned prog	ram in MIT	[ Muzaffa	rpur.
I hereby undertake	that m	ny -	ward		College	Roll
Nowill	maintain	the	minimum	attendance	of 75%	in all
semesters, failing which the institute may take such punitive action against						
the ward, as may be deemed fit and proper.						
Name of student						
Name of Parent/Guardian & Address						
Contact No. /Email Id		_				

Date:	
Place:	

Signature of Father/Mother