



उत्तर प्रदेश UTTAR PRADESH

**AFFIDAVIT-4**

**For the Progressive/Complete Closure of the Institution**

I Dr. Pushpendra Singh, Secretary, Society Smt. Shakuntala Devi Shikshan Sansthan Samiti, Indra Nagar, Mohammadabad, Farrukhabad U.P. son of Mr. Jay Singh aged 38 resident of Indra Nagar, Mohammadabad, Farrukhabad do hereby solemnly affirm, state and undertake to comply with the following in connection with my application Ref.No. DAPC/81/2023-24 to Board of Technical Education, Lucknow, Uttar Pradesh for the Complete Closure of our Institution Dr. Angna Pharmacy College, Shakuntala Nagar, Daheliya, Bewar Road, Fatehgarh-Farrukhabad U.P.

Do here by solemnly affirm, state and declare as under:

1. That our Society Smt. Shakuntala Devi Shikshan Sansthan Samiti, Indra Nagar, Mohammadabad, Farrukhabad U.P. vide resolution for closing the Institution and has applied for Closure of Dr. Angna Pharmacy College, Shakuntala Nagar, Daheliya, Bewar Road, Fatehgarh-Farrukhabad U.P. 209602.;
2. That liabilities, if any, arise out of Closure of Dr. Angna Pharmacy College, Shakuntala Nagar, Daheliya, Bewar Road, Fatehgarh-Farrukhabad U.P. 209602 shall be solely that of Society Smt. Shakuntala Devi Shikshan Sansthan Samiti, Indra Nagar, Mohammadabad, Farrukhabad U.P.

That Society Smt. Shakuntala Devi Shikshan Sansthan Samiti, Indra Nagar, Mohammadabad, Farrukhabad U.P. undertakes that no further admission of student shall be made in the current and forthcoming years;

**ATTESTED**

**Bade Singh Chauhan**  
**Advocate-NOTARY**  
**Farrukhabad**

4. That Society Smt. Shakuntala Devi Shikshan Sansthan Samiti, Indra Nagar, Mohammadabad, Farrukhabad U.P. undertakes to provide all the facilities to the existing student till they pass out;
5. That have submitted all the additional documents/ information regarding resolution/ NOC's/ Certificates to Board of Technical Education, Lucknow, Uttar Pradesh in respect of our of application (as application) and the same is true and completes;
6. That the facts stated in this Affidavit are true to my knowledge. No part of the same is false and no material has been concealed there from;and



(Dr. Pushpendra Singh)  
~~CHAIRMAN/SECRETARY~~  
 Secretary

Smt. Shankuntala Devi Shikshan Sansthan Samiti,  
 Indra Nagar, Mohammadabad-Farrukhabad U.P.

**VERIFICATION**

I Dr. Pushpendra Singh, the above named deponent(s) do hereby verify that the stated in the above affidavit are true to my knowledge. No part of the same is false and no material has been concealed there from.

Verified at Farrukhabad on this the 29-01-2024

(Name, Designation and Address of the Executants)

**ATTESTED**

~~Badle Singh Chauhan~~  
**Badle Singh Chauhan**  
**Advocate-NOTARY**  
**Farrukhabad**

(Dr. Pushpendra Singh)  
~~CHAIRMAN/SECRETARY~~  
 Secretary

Smt. Shankuntala Devi Shikshan Sansthan Samiti,  
 Indra Nagar, Mohammadabad-Farrukhabad U.P.

Solemnly affirmed and signed before me by the deponent on this-day of-  
 month,year.... At my office.

(Judicial First Class Magistrate/ Notary Public/ Oath Commissioner)