



ABES Engineering College, Ghaziabad

Centre for Applied Research and Entrepreneurship (CARE)

INDEMNITY FORM

I, Mr./Ms.,
S/O/ D/O
R/O
having Admission No.,
hereby state and undertake the following:

Passport size
photograph of
the student

1. I am a (semester)..... (year) student of
Engineering Department at ABES Engineering College, Ghaziabad.
2. I will be working for
(project/competition name), from to
3. The competition will be organized at, from to.....
4. I understand that involvement in the said project/competition may include working beyond normal institute hours and during the weekends/holidays and may also involve travelling.
5. I am willing to work beyond normal institute hours and undertake the travel involved at my own risk and responsibility.
6. I have intimated my parents/guardian about the possibility of travel and the possibility of working beyond normal institute hours and have sought their permission for the same.
7. While working for the project/competition I promise to abide by all the safety and security guidelines issued from time to time.

Place:

Mobile No:

Signature with date

RECOMMENDATIONS/APPROVAL OF CARE

Signature with date

RECOMMENDATIONS/APPROVAL OF THE CONCERNED HOD

Signature with date

UNDERTAKING FROM THE PARENT/GAURDIAN

I, Mr./Ms., parent/guardian of
Mr./Ms., give our consent to the
participation of our ward in the above mentioned project/competition. I have been thoroughly
briefed about the project (specially points no. 4 to 6 mentioned above) and the associated risks.

Place:

Mobile No:

Signature with date