



राष्ट्रीय प्रौद्योगिकी संस्थान रायपुर
NATIONAL INSTITUTE OF TECHNOLOGY RAIPUR
(Institute of National Importance)
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No./ 6288 /NITRR /Students Clerk/ 2008 Raipur, dated 05.01.2008

To,

The Parents of a student
at NIT, Raipur

Sub : Filling up of an undertaking NOT to go on prolonged absentism and to keep attendance of high level.


Dear Parent,

Your ward is studying at National Institute of Technology, Raipur. To carry out studies effectively at any technological institute, **attendance** of a student in the class and thereby effective interaction with the teaching staff in the class as well as laboratory is of paramount importance, that too when the process of evaluation is continuous by way of two mid-semester class tests, viva-voce in laboratory on every day of experimental work, take home exam/ assignment etc.

As such, your ward studying at NIT is being intimated by this letter that he/she will have to maintain good percentage of attendance in class/laboratory and will refrain from mass/individual **absentism** sometimes observed by the students, or long absentism on even medical ground.

In this regard, an **undertaking** is to be filled in, duly signed by the student and also by his/her parent, ultimately submitted to the Director of NIT Raipur through their Head of Department. The proforma of undertaking is enclosed herewith for necessary action please.

Encl : One, as above, for necessary action.


Director,
N.I.T., Raipur
05.01.08

UNDERTAKING

I, the undersigned am a student of B.Tech./B.Arch./M.Tech./
M.C.A. _____ Semester, _____ Department. I
declare that I shall not be participating in any "Mass Absentism" alongwith other
students. I very well understand importance of attendance in the class/
laboratory and I promise to keep my attendance in theory as well as laboratory
classes of high level. My parents also vouch for my giving this undertaking.

Date,

(_____)
Sign & Name of Student
B. Tech/B. Arch/M. Tech/
MCA _____ Semester
Class Roll No. _____

Date,

(_____)
Sign & Name of parent
of the Student
Address : _____

Tel. No.(if any) _____

G12.56

