

## UNDERTAKING FROM THE STUDENT

I, \_\_\_\_\_ am agree to be transferred to Pharmacy program conditionally for a “Challenging Semester”. During this semester-II 2020-2021, I would be allowed to register the possible courses in the first year of pharmacy program.

I am aware that during the challenging semester, the following conditions apply:

1. I should not “Withdraw” course/s.
2. I should not postpone the challenging semester.
3. I should not be debarred in any course.
4. I should secure a minimum grade of “B” in the two courses (PHAR3100 Fundamental of Pharmacology and PHAR6100 Pharmaceutical Terminology) registered from pharmacy specialization and should pass all the courses registered.
5. At the end of Semester-II, 2020-2021, I should not enter in probation and should secure GPA and CGPA at least 2.00

I am aware that if I do not satisfy any of the above condition, this would result in reversal of the transfer and cancelling the student status in the Pharmacy Department.

**Student’s Name:**

**Student Signature:**.....

**Date:** .....

.....  
**Head – Pharmacy Department**