

**ANNEXURE**

**ANTI-DRUG DECLARATION FORM TO BE SIGNED BY THE STUDENT**

I.....(name) son/daughter/ward of  
Mr./Mrs./Ms.....(name) admitted to  
(course and year).....in.....(institution) during the  
year....., hereby agree to the following terms:

1. I am aware that the possession, use, sale and distribution of alcohol/tobacco/any psychoactive substances are wrong and harmful.
2. I shall refrain from using, being under the influence of, possessing, furnishing, distributing, selling or conspiring to sell or possess, or being in the chain of sale or distribution of alcohol/tobacco/any psychoactive substance within the premises of the institute/university or during any sponsored activities by the institute/university.
2. I shall report to the authorities of the institution any irregular behaviour that I observe in relation to the possession, use, sale and distribution of alcohol/tobacco/any psychoactive substances which may have occurred at the institution or during any activities Conducted by any students or institution.
4. I shall support and actively participate in any substance use prevention education programmes which may be organized by the institution/government which would enable me to be a better student and citizen of India.
5. I shall co-operate with the authorities of the institution and other relevant authorities in their investigation of any substance-related incident of which I may have information, and to prevent the possession, use, sale and distribution of any psychoactive substances in or around my Institution.

Signature.....

Name of the Student : .....

**Government College Barsar**

**District Hamirpur (H.P.)-174305**

**Parent-Teacher Association Membership Form (Session : 202.....-2.....)**

1. Name of the Member.....  
(Student's Father/Mother/Guardian in blood relation)
2. Permanent Address.....  
.....Mobile Number.....Pin Code.....
3. Correspondence Address.....  
.....Mobile Number.....Pin Code.....
4. Description of the Ward (s) studying in the college :



Sr. No.	Name of the Student	Class	Roll No.	Relation
1.				
2.				

5. Detail of Membership fee and donation  
Rs. .... Receipt No. .... Date.....

**Signature of Member  
(Father/Mother/Guardian)**