

Undertaking Against Drug Abuse

(To be submitted at the time of admission)

Name of the Institution: **GSMSSS Indora** Date: _____

I, _____, son/daughter of _____,
residing at _____, hereby solemnly affirm and
declare the following:

1. I understand that drug abuse is detrimental to my health, well-being, and academic progress.
2. I commit to abstaining from the use, possession, or involvement in any form of drug abuse during my tenure as a student at GSMSSS Indora.
3. I am aware of that the School is a **"No Intoxication zone"** and understand that any violation will attract strict disciplinary actions, including possible suspension or expulsion.
4. I will participate in awareness programs, if required, to further educate myself on the dangers of drug abuse.

I hereby acknowledge and agree to comply with the above commitment and take full responsibility for my actions.

Signature of the Student: _____

Signature of the Parent/Guardian: _____

Mobile Number: _____