

**G.B. Pant Social Science Institute, Prayagraj**  
**University of Allahabad**

**UNDERTAKING FOR TRANSFER CERTIFICATE/MIGRATION CERTIFICATE  
FOR CANDIDATES OF OTHER INSTITUTIONS**

The Administrative Officer  
G.B. Pant Social Science Institute  
Prayagraj

**Subject: Undertaking for Transfer Certificate / Migration Certificate**

Sir,

I....., son/daughter of..... resident  
of .....  
(Permanent Address) hereby declare that I have been admitted in MBA (RD) Batch  
2024-26 and have not submitted my original Transfer / Migration Certificate.

I undertake that I will submit the same latest by ..... (Date)

If, I fail to submit the Transfer Certificate / Migration Certificate within the above  
mentioned date, G.B. Pant Social Science Institute shall have right to cancel my  
admission and take appropriate action against me.

Place: .....

(Signature of Candidate)

Name: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

Roll No: \_\_\_\_\_

Test Score: \_\_\_\_\_

**G.B. Pant Social Science Institute, Prayagraj**  
**University of Allahabad**

The Administrative Officer  
G.B. Pant Social Science Institute  
Prayagraj

**Subject: Undertaking for Gap Year**

Sir,

I \_\_\_\_\_ D/o/S/o \_\_\_\_\_ and resident of \_\_\_\_\_

do hereby solemnly state and undertake as under:

1. That I am a resident of above said address.
2. That I have passed \_\_\_\_\_ class/course in the year \_\_\_\_\_ from \_\_\_\_\_ College/Institute/ University.
3. That I have not joined/admitted in any Post Graduate program from any University during this gap period.
4. That there is a GAP in my studies from \_\_\_\_\_ to \_\_\_\_\_.
5. That during the GAP period I was not involved in any offence or in an illegal activity and that no Criminal case is pending against me in any court of law.
6. That I command a good reputation and respect in general public.
7. That I have not availed any scholarship for the same course from any College/ Institute/ University.
8. That the above mentioned contents from point 1 to 7 are true to the best of my knowledge and belief.

Date:

Signature of the Candidate

Name of the Candidate: \_\_\_\_\_

Course : \_\_\_\_\_

Contact No.: \_\_\_\_\_

Email: \_\_\_\_\_