



ANTI-DRUG DECLARATION FORM TO BE SIGNED BY THE STUDENT

I, _____ (Name) S/D/Ward of Mr./Mrs.
_____ (Name) admitted to _____
(Course & Year) in _____ (Institution) during
the year _____, hereby agree to the following:

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 substances within the premises of the institute/university or during any sponsored activities by the institute/university.
3. 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.

Date:

Signature:

Name of the Student:.....