The Secretaries
Sports Committee/Councils
Member Universities AIU.

Subject: Submission of Undertaking by the Athletes and Coach(s) before participation in Inter University Tournaments: 2015-16.

Dear Sir/Madam,

A duly constituted committee by National Anti Doping Agency (NADA) in its meeting held on October 28, 2015 unanimously decided to assess and check the possible involvement of university/athletes/sportspersons in doping during National University Games as there is increase in the number of Anti Doping Violation in those disciplines of sports in which high degree of Power, Speed and Strength are required to perform well during highly contested sporting competitions i.e. Weight Lifting, Power Lifting, Athletics especially in Throws and Sprints, American Football, Boxing, canoeing and Kayaking, Cross Country, Cycling, Judo, Rowing, Wrestling and Yachting etc.

Hence, it was also decided in consultation with all the participating stakeholders that details of coaches in Anti Doping Rules Violation during the hearing of athletes/sportspersons who are tested positive will be invited to explain their view point in such cases of drug abuse in sports.

Further, it has been observed that there is a possibility of misuse/inadvertent use of supplements by athletes probably on the advice of their coaches. It was also agreed that information on educational programme by NADA in various universities will be provided to AIU for effective coordination with the member universities with a view to educate and sensitize the students and enabling them to be aware of the deadly side effects of the doping, in this regard.

You are, therefore, requested to get the UNDERTAKING signed from each athlete/sportsperson, countersigned by his/her coach and Director / Secretary Sports of the concerned university with a view to keep the university sports drug free. A copy of the sample undertaking is enclosed at flag "A" for ready reference.

This may please be accorded top priority.

With regards,

Yours Sincerely,

[Signature]

Dr. Gurdeep Singh
Joint Secretary (Sports)
Association of Indian Universities  
(Sports Division)

UNDERTAKING

I, ________________ representing university ________________________ for participation in All India/Zonal _______________ tournament(s) from _____________ to _____________ hereby declare and clarify on oath that I am aware of names of banned drugs under LATEST WADA code and state with full responsibility that I have not consumed any banned drug substance(s) and that I am absolutely free from drugs banned by WADA.

In case of my “Positive Dope Test” at the above Championship(s)/Competition(s), I shall solely be responsible for the same and shall be liable for all consequences arising out of my “Positive Dope Test” as provided in the Anti Doping Rules adopted by National Sports Federation(s) approved/recognized by Ministry of Youth Affairs and Sports.

It is my personal duty to ensure that no “Prohibited Substance” enters my body. Hence, I am fully responsible for any Prohibited Substance(s) or its Metabolites or Markers found to be present in my sample. Accordingly, it is not necessary that intent, fault, negligence or Knowing Use on my part be demonstrated in order to establish an anti doping violation.

Further, I certify that all the contents of this Undertaking have been explained to me in detail by my Coach/Manager/Secretary Sports of my College/University in the language which is fully known to me.

Countersigned: _______________  
[Coach/Trainer] _______________  

Name/Father’s Name  
Name of University and Mailing Address  
Mobile/Tel/Fax  
Email

CERTIFICATE

I, ________________________, coach/trainer of above athlete(s) agree to abide by Rules and Regulations of Anti Doping Policy adopted by National Sports Federation(s) and National Anti Doping Agency and I am aware of the consequences of use of banned drug(s) by my above athlete(s)/trainee(s). Accordingly, I abide by the sanctions imposed on me by National Anti-Doping Agency (NADA) and support the appropriate action taken by concerned National Sports Federation in the case of above athlete(s)/trainee(s) being testing positive.

Countersigned: _______________  
Email: _______________

Name of coach: _______________  
Mobile No: _______________

Verified by: _______________  
Secretary, University Sports Committee  
With seal  

Place: _______________  
Dated: _______________