

Undergraduate Medical Education Board, National Medical Commission
Family Adoption Programme Survey

Form 2

Declaration of Data Authentication

We, the undersigned, hereby declare that the data collected during the health camps held under the Family Adoption Program Survey, conducted by **Government Medical College, Dharashiv**, are authentic and accurately represent the findings of the survey. This declaration serves to confirm that the following conditions have been met to ensure the integrity and reliability of the data:

1. Originality:

- The data collected are original and were gathered through scientifically sound and ethically approved methods.
- Any secondary data utilized from other sources have been properly cited and referenced.

2. Accuracy:

- The data presented have been accurately recorded, processed, and analysed.
- No data have been manipulated, altered, or fabricated to misrepresent the findings of the survey.

3. Ethical Compliance:

- The collection, handling, and presentation of data adhere to the ethical guidelines and standards set forth by (relevant ethical committee or institution).
- Informed consent was obtained from all participants, and their privacy and confidentiality have been safeguarded.

4. Data management:

- The raw data and related documentation are securely stored and are available for review upon request by the relevant authorities or for the purpose of peer review.
- Proper data management practices have been followed to ensure the long-term preservation and accessibility of the data.

5. Conflict of Interest:

- Any potential conflicts of interest that may have influenced the data collection or analysis have been disclosed.

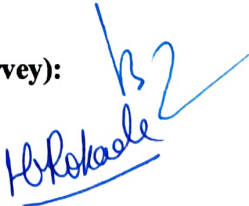

By signing this declaration, we affirm the authenticity and integrity of the data collected during the health camps and acknowledge our responsibility in maintaining the highest standards of ethics and scientific rigor.

Signature with date and designations.

Faculty in Charge (Health camps under FAP survey):

Head of the Department Community Medicine:

**Head of the Institute/College
With Seal/Stamp.**

DEAN
Government Medical College
Osmanabad