UNIVERSITY OF MEDICAL SCIENCES, LAJE ROAD, ONDO,

ONDO STATE



Oath of Secrecy

Isolemnly swear/affirm that I will not directly or indirectly communicate or reveal any matter to any person which shall be brought under my consideration or shall come to my knowledge in the discharge of my official duties except as may be required for the discharge of my official duties or as may be specially permitted by the Vice Chancellor/the University's Governing Council. So help me God/Allah

SWORN TO AT THE HIGH COURT REGISTRY ONDO

Dated this _____ day of _____ 2023

Deponent

BEFORE ME

COMMISSIONER FOR OATHS