



NATIONAL MOOT COURT COMPETITION



9th To 11th October, 2026

SCAN FOR REGISTRATION



SCAN FOR ALL THE DETAILS



ABOUT CENTRAL LAW COLLEGE



Residing in the heart of the city, Central College comes under the umbrella of City Group of Colleges. City Group of Colleges has been standing the test of time and for over 3 decades and our motive since day one is to impart Excellence in Education. Currently, the Group manages five well known campuses in Lucknow and Barabanki, housing 21 Colleges and 2 Hospitals. With The goal of providing high-quality education to the surrounding community, Central College is a extension of City Group of Colleges, located near Sultanpur Road in the lovely neighbourhood of Sushant Golf City.

Founded to accelerate the nation's industrial revolution, City Group is profoundly intellectual. With ingenuity and drive, our graduates have invented fundamental technologies, launched new industries, and created a name for themselves. Our community gains tremendous strength as a magnet for talent from around the world. Through teaching, research and innovation. Central College provides an exceptional community that pursues its mission of service to the nation and the world. Central College provides the best of both physical and social structures that support a student's well-being and overall success outside of the classroom. This includes everything from housing and dining options to recreational spaces, health and well-ness resources and transportation service.

CHIEF PATRON



Dr. Mamta Srivastava

Chairperson, City Group of Colleges

A visionary educationist and an inspiring leader, Dr. Mamta Shrivastava has dedicated her life To nurturing quality education and empowering young minds. Under her dynamic leadership, City Law College has flourished alongside Several prestigious institutions offering education in Law, Pharmacy, Paramedical Sciences, and various Undergraduate and Professional Programmes, reflecting her unwavering commitment to academic excellence and holistic development.

Her remarkable contributions to the field of education have earned her numerous accolades and recognitions. Through her tireless efforts, she has created opportunities for thousands of students to pursue their aspirations with confidence and integrity.

Beyond her achievements as an academic administrator, Dr. Shrivastava stands as a beacon of women's empowerment, inspiring countless women to lead with courage, determination, and compassion. Her vision, perseverance, and dedication continue to shape future professionals and responsible citizens, making her a true role model and a source of inspiration for generations to come.

MESSAGE FROM HOD



Prof. Sumbul Siddiqui

Head of Department, Central Law College

At Central Law College, we are dedicated to fostering academic excellence and holistic development. As Head of Department, my vision is to ensure that every student not only acquires strong theoretical knowledge but also develops practical skills that prepare them for real-world challenges. We emphasize critical thinking, research aptitude, and professional ethics, enabling our students to grow into confident legal professionals and responsible citizens. With the guidance of our experienced faculty and a supportive learning environment, we aim to cultivate leaders who will make meaningful contributions to society and the legal fraternity. Together, we continue our journey of shaping bright minds into future-ready professionals.

MOOT PROBLEM

I. FACTUAL BACKGROUND

1. Mr. Devrat Rao, aged 58 years, was a practicing advocate and a former professor of law residing in the State of Uttam Pradesh. In January 2024, he was diagnosed with **Amyotrophic Lateral Sclerosis (ALS)**, also known as **Motor Neuron Disease**, a progressive neurodegenerative illness for which no curative treatment was available in his case.
2. Over the next two years, Mr. Rao progressively lost voluntary motor function. By June 2026, he required assistance for almost every physical activity and communicated primarily through an eye-tracking computer system. His cognition was unaffected. On repeated clinical assessment, he was found capable of understanding, retaining, and communicating decisions concerning his medical treatment.
3. A five-member Medical Board at the **Apex Institute of Medical Sciences**, comprising specialists in neurology, critical care, psychiatry, palliative medicine and internal medicine, concluded that Mr. Rao's condition was incurable and irreversible. The Board recorded that his respiratory function was deteriorating and that he was likely to require invasive mechanical ventilation for continued survival. Mechanical ventilation could prolong life but would not reverse the underlying neurological disease.
4. In March 2025, when he was still able to sign documents physically, Mr. Rao executed an **Advance Medical Directive** in accordance with the procedure then applicable. The Directive stated that, if he later lost decision-making capacity and reached an irreversible medical condition, he did not wish to receive specified life-sustaining interventions merely to prolong the dying process. It did not authorize any doctor or family member to administer a substance with the intention of causing his death.
5. Mr. Rao had, on more than one occasion, discussed end of life care with his wife, Mrs. Kavita Rao, and his adult daughter. He stated that he wished to avoid prolonged invasive treatment when it no longer offered a prospect of recovery. His younger brother, Mr. Raghav Rao, disagreed with that view and maintained that every available measure should be taken to preserve Mr. Rao's life.

6. In July 2026, Mr. Rao developed severe respiratory failure and was admitted to the Apex Institute of Medical Sciences. His treating team advised invasive mechanical ventilation. They also informed him that, if ventilation was not commenced, his respiratory failure was likely to result in death within a relatively short and medically unpredictable period. Mr. Rao remained fully conscious and continued to possess decision-making capacity.
7. After counselling the treating team, Mr. Rao refused mechanical ventilation. He asked that all reasonable measures for comfort be continued, including medication for pain, anxiety and breathlessness. The hospital informed him that his refusal of invasive ventilation would be respected and that palliative and end of life care would continue.
8. The palliative care team discussed available measures with Mr. Rao. It informed him that, if his symptoms became refractory, proportionate palliative sedation could be considered for symptom control. Such sedation could diminish or eliminate consciousness and would not be administered with the purpose of causing death. The team also explained that neither palliative medication nor withdrawal of ventilation could guarantee the precise time at which death would occur.
9. Mr. Rao thereafter made a separate request to Dr. Arjun Mehra, his treating physician. He asked Dr. Mehra to administer medication whose primary purpose would be to cause his death peacefully and rapidly. Mr. Rao stated that he did not wish to await progressive respiratory failure or spend his final period under deep sedation. He wished, while still conscious and competent, to decide the time at which the final stage of his illness would end.
10. Dr. Mehra declined the request and informed Mr. Rao that the existing legal framework in India did not expressly authorize a medical practitioner to intentionally administer a lethal substance for that purpose. Over the following days, Mr. Rao repeated the request and furnished a written declaration recording that the decision was voluntary, informed, and made after considering the alternatives explained to him.

11. Mrs. Kavita Rao and Mr. Rao's adult daughter supported his decision. Mr. Raghav Rao opposed it. He stated that the distinction between refusing treatment and asking another person to cause death could not be erased by consent, and he further expressed concern that decisions of this nature could be influenced by emotional distress, dependency or the financial burden of prolonged treatment.
12. In view of the disagreement within the family, an independent psychiatrist examined Mr. Rao. The psychiatrist found no clinical depression, psychosis, cognitive impairment, or coercive influence sufficient to affect his decision-making capacity. The report recorded that Mr. Rao understood the nature and consequences of his request.
13. A second independent medical panel also examined Mr. Rao and certified that he remained capable of making medical decisions. The panel recorded that he understood the consequences of refusing life-sustaining treatment, the nature of palliative care, the difference between allowing the underlying illness to take its course and administering medication with the intention of causing death, and the legal uncertainty surrounding active euthanasia.
14. The panel further recorded that Mr. Rao's request was consistent, voluntary, and unequivocal. It nevertheless did not recommend or authorize active euthanasia. The hospital administration thereafter formally directed that no medication be administered for the purpose of intentionally causing Mr. Rao's death.
15. On 18 August 2026, after obtaining a final written declaration from Mr. Rao and after consulting members of the treating team, Dr. Mehra administered medication to Mr. Rao with the admitted and primary intention of causing his death. The medication was not administered as palliative sedation or as an attempt to treat an underlying complication. Mr. Rao died approximately twenty minutes later.
16. Immediately thereafter, Dr. Mehra informed the hospital administration and the police. He handed over Mr. Rao's Advance Medical Directive, written declarations, medical-board reports, psychiatric assessment, informed-consent records, treatment papers, and the record of the medication administered. No allegation was made that Dr. Mehra had obtained any financial or other personal benefit from Mr. Rao's death.

17. The police registered a **First Information Report** against Dr. Mehra alleging that the intentional administration of a lethal substance resulting in death attracted the provisions of the Bharatiya Nyaya Sanhita, 2023 relating to culpable homicide and murder. The prosecution took the position that the act, having been done with the specific intention of causing death, was punishable as murder under Section 103 read with Section 101 of the BNS.
18. Dr. Mehra approached the High Court of Judicature at Allahabad under Article 226 of the Constitution seeking quashing of the criminal proceedings. He contended, among other grounds, that the legal effect of Mr. Rao's informed consent had to be considered under Exception 5 to Section 101 of the BNS and that the criminal law could not be applied without regard to constitutional principles of dignity, autonomy, privacy and bodily integrity.
19. Mrs. Kavita Rao and her daughter filed a connected writ petition seeking a declaration that a competent adult suffering from an incurable and irreversible medical condition may, in narrowly defined circumstances and subject to stringent safeguards, seek physician administered active euthanasia. Mr. Raghav Rao was permitted to intervene. The Union of India and the State of Uttar Pradesh opposed the petitions.
20. The Union and the State submitted that the existing law recognizes a competent patient's right to refuse life-sustaining treatment and permits withholding or withdrawal of such treatment within the judicially recognized framework but does not authorize a doctor to positively cause death. They further contended that the BNS itself distinguishes between consent to the risk of death and a complete legal justification for intentionally causing death, and that any regime permitting active euthanasia would require legislative choices concerning safeguards, medical regulation, vulnerability and criminal liability.
21. The High Court dismissed the connected petitions. It declined to quash the criminal proceedings and held that the existing constitutional framework could not, in the absence of legislation, be read as an authorization for physician administered active euthanasia. The High Court observed that the legal effect of Mr. Rao's consent, including the applicability of Exception 5 to Section 101 of the BNS, did not by itself amount to a complete immunity from criminal law.

22. Dr. Mehra, Mrs. Kavita Rao and her daughter thereafter filed Special Leave Petitions under Article 136 of the Constitution. The Supreme Court granted leave, consolidated the matters, stayed in coercive steps against Dr. Mehra during the pendency of the appeals, and directed the parties to address the constitutional and statutory questions set out below.

II. ISSUES

1. Whether Article 21 of the Constitution of India encompasses, in the case of a competent adult suffering from an incurable and irreversible medical condition, a right to seek medical assistance in bringing about death with dignity?
2. Whether the constitutional and legal distinction between withholding or withdrawing life-sustaining treatment and the intentional administration of a lethal substance is constitutionally sustainable under Articles 14 and 21?
3. Whether a medical practitioner who intentionally administers a lethal substance at the voluntary and informed request of a competent adult incurs criminal liability under Sections 100, 101, 103 and/or 105 of the Bharatiya Nyaya Sanhita, 2023, and whether any statutory exception is applicable?
4. Whether, in the absence of legislation expressly permitting active euthanasia, the Supreme Court may recognise a narrowly circumscribed right and prescribe safeguards for its exercise, or whether such a determination falls within the exclusive domain of Parliament?

Disclaimer

This moot proposition is a fictional academic problem prepared solely for the purposes of the competition. The names of persons and institutions, except references to constitutional or statutory authorities, are fictitious. Any resemblance to actual persons or events is coincidental. Participants shall confine themselves to the facts stated above and the permissible legal materials.

METHOD OF REGISTRATION

- Each team must register by filling up the registration form available at <https://forms.gle/tVsUzhhk7UTY2ofu9> and paying the registration fee as provided. Each team shall complete such registration by 25th September, 2026 . (23:59:59 Hours IST).
- **Registration fee: Rs.2500/- (Rupees Two Thousand Five Hundred Only) inc. GST.**
- Registration fee will be non-refundable in case of non-participation after registration.
- The reporting time is 10:00 Hours IST on 09th October, 2026 at the registration desk of the competition venue.
- Accommodation will not be provided by the college; however, the committee will offer assistance and guidance regarding accommodation arrangements.

GENERAL RULES

ELIGIBILITY

- i. The Competition is open to all students, enrolled bona-fide regularly in an undergraduate law course conducted by any recognized College/Institution/University.
- ii. A recognized College/Institution/University is entitled to send 1 or more teams to the competition.
- iii. Each team shall comprise a minimum of two members and a maximum of three members. The team, which comprises of two members, both the members shall be designated as “Speakers” and one among them shall be designated as a “Researcher”. The team, which comprises of three members, two members shall be designated as “Speakers” and the third member shall be designated as a “Researcher”.
- iv. Each team shall be assigned a “Team Code” by the Moot Court Committee. The team shall use its team code for identification purposes and the names of participants, or their colleges may not appear on or within the memorials. Signature pages are prohibited.
- v. Additional member or team coach is **NOT** allowed to accompany them

MEMORIAL

- i. Each team shall prepare a Petitioner and a Respondent Memorial.
- ii. Qualified teams are requested to submit 10 hard copies (Petitioner-5 and Respondent-5) at the venue on 7th October, 2026
- iii. One (1) soft copy (only in MS Word .doc/.docx format) must be emailed to centrallawcollegemcc@outlook.com latest by 4th October, 2026 (23:59 hours IST) with the subject “Memorials for Team Code__”. The file names of the electronic copies of the Memorials must contain

only the team code and the side being represented in the following format: e.g.(for Team Code 13) 13P or 13R, “P” being for “Petitioner” Memorial and “R” for “Respondent” Memorial and so forth.

CLARIFICATIONS TO THE MOOT PROPOSITION

- i. Participating teams may request for clarifications to the official moot problem by sending an email to centrallawcollegemcc@outlook.com latest by 23rd Sept, 2026 (23:59 hrs IST).
- ii. A full list of clarifications shall be released on 24th Sept, 2026

MARKING SCHEME

- i. Each team will get a fixed time to present its case. This includes the time for rebuttal and sub- rebuttal.
- ii. The division of time per speaker is left to the discretion of the team.
- iii. The arguments should be confined to the issues presented in the memorial.
- iv. The researcher needs to be present with the speakers during all the rounds.
- v. Maximum scores for the court rounds will be 100 marks per speaker. The court rounds will be judged on the following parameters:

Knowledge of Law	20 marks
Application of Law to Facts	20 marks
Ability to Answer	20 marks
Style, Poise, Courtesy and Demeanor	20 marks
Time Management	10 marks
Organization	10 marks

NOTE: *Intake/use/mere possession of any prohibited substances (eg: cigarette/alcohol /narcotic substance/any sharp object) is strictly prohibited during the stay throughout the competition, non-compliance of which may lead to immediate disqualification.*

AWARDS AND PRIZES



- **Winning Team: Rs. 25,000/-**

Trophy + Medal + Certificate



- **Runners Up: Rs. 15,000/-**

Trophy + Medal + Certificate



- **Best Speaker: Rs. 3,000/-**

Trophy + Medal + Certificate



- **Best Memorial: Rs. 3,000/-**

Trophy + Medal + Certificate



- **Best Researcher: Rs. 3,000/-**

Trophy + Medal + Certificate



- **Medals for Winners, Runner Ups & Semi Finalists**



- **Certificate Of Participation To All Participants**

IMPORTANT DATES

DATES	PARTICULARS
15 th August, 2026	Release of Moot Proposition
23 rd September, 2026	Last Date to Seek Clarifications
25 th September, 2026	Last Date of Registration
4 th October, 2026	Last Date for Submitting Softcopy of the Memorial
7 th October, 2026	Last Date for Submission of Hardcopy of Memorial
9 th October, 2026	Registration of Qualified Teams Researcher's Test Preliminary Round
10 th October, 2026	Draw of Lots Quarter-final Rounds
11 th October, 2026	Semi-final Rounds Final round Valedictory ceremony

QUERIES

For any further queries, kindly mail to centrallawcollegemcc@outlook.com. OR +91-9170089333 Vedansh Pratap Singh (Convenor) Our dedicated team will be glad to assist you.

PERKS OF PARTICIPATION



- **Prize Pool of ₹50,000**



- **Certificates:**
Certificate of Participation to all participants



- **Semi-Finalist Recognition:**
Formal recognition to all semi-finalist teams/individuals
Medals awarded to all semi-finalists



- **Special Mentions (Awards):**
Best Speaker(s)
Best Researcher
Best Memorial (written submission)



- **Meals & Hospitality:**
Breakfast, Lunch, and High Tea provided to all participants on event days



PATRONS



Dr. Mamta Srivastava
Chairperson, City Group of Colleges



Prof. Sumbul Siddiqui
Head of Department, Central Law College

ORGANISING COMMITTEE



Ms. Akshita

Faculty Convenor



Mr. Divyanshu

Faculty Convenor



Vedansh Pratap Singh

Convenor



Zoya Siddiqui

Co-Convenor

ORGANISING COMMITTEE



Asmita Kumari
General Secretary



Lavanya Tripathi
Joint Secretary



Jagriti Tiwari
Student Advisor



Ziya Alam
Student Advisor



Hritik Tiwari
Technical Committee



Sanidhya S. Rajpoot
Technical Committee



Akshay Singh
Logistics Committee



Kunal Gupta
Disciplinary Committee

ORGANISING COMMITTEE



Srishti Shukla

Research Committee



Sonakshi Yadav

Research Committee



Shrishti

Documentation Committee



Vanshika

Documentation Committee



YashVardhan Singh

Operations Committee



Aanhvi Singh

Operations Committee