

**UNDERTAKING**

I,.....(Name of Candidate), son/daughter of .....(Name of Parents) hereby accept the offer of scholarship from ..... (Mention sponsoring Agency) for studies in..... (Mention the course) in..... (Mention institute/university and country) for a duration of .....

I hereby undertake to:

1. Pursue the course and complete it within the duration specified.
  2. Not change to another course.
  3. Abide by all rules and regulations of the Royal Government and the institute concerned.
  4. Not discontinue the course and/or leave the institute prior to completion of the course without written consent from the Agency concerned.
  5. Complete my training/studies and serve the Government for a minimum period of two times the duration of the course.
1. Pay to the Government an amount equal to two times the expenses incurred by the Government/Agency on the training if:
    - 6.1 I discontinue the training for a reason within my control; or
    - 6.2 I fail to produce academic transcript/certificate; or
    - 6.3 I fail to serve the Government two times the duration of the course, if required.

I, hereby do confirm that I have been briefed on all rules governing my training and I have understood them, including the implications and consequences of deviating from them.

In particular, I understand that in the event that I do not adhere to any one of the above stated conditions, the guarantor and/or I shall be liable for legal action by the Government.

Sd/-

Place:

(Affix Legal Stamp)

Date:

Name & Office address

Caution: This is an important legal document and therefore, should be executed after clearly understanding all the responsibilities, liabilities and implications.

In the event of any failure on the part of the above named person to abide by this undertaking, I, ..... (Name of Guarantor), resident of ..... hereby undertake to refund to the Government the stipulated amount or accept my liability to any other penalty as may be decided by the Government.

In the event that I do not adhere to the above, I understand that I shall be liable for legal action by the Government.

Sd/-

Place:

(Affix Legal Stamp)

Date:

Name of Guarantor: .....

Relation with the candidate: .....

Occupation: .....

Present address:.....

Permanent Address: .....

Mailing address: .....

Witnesses:

1).....

2) .....