UNDERTAKING BY THE APPLICANT

I,	
(Name, Middle name, Family name) of	(country) certify that
the information provided by me in this form is true, comp	lete and correct.
I also certify that :- (i) I have read the course brochure and that I am aw conditions in India.* (ii) I have sufficient knowledge of English to participate in (iii) I am medically fit to participate in the Course and hat the designated doctor. (iv) I have not attended any programme previously spons (v) I have not applied for or am not required to attend meeting etc. during the period of the course applied for.	n the training programme. ave submitted a medical certificate from ored by Government of India.
I undertake to: (a) Comply with the instructions and abide by Rules, stipulated by both the nominating and sponsoring Govern (b) Follow the full and complete course of study/ tr University/Institution/ Establishment in which I undertakt (c) Submit periodic assessments / tests conducted by the prescribed);	nments in respect of the training; aining and abide by the Rules of the ke to study or undergo training;
(d) Refrain from engaging in political activity, or any form (e) Return to my home country at the end of the course of (f) I also fully undertake that if I am granted a training av if I fail to make adequate progress or for other suf Government.	f study or training; vard, it may be subsequently withdrawn
(g) I confirm that I will not travel to India to attend the Co (for lady participants).	
(h) I will provide full refund of cost of air-ticket if the tolonger attend.(I) That I have clearance from my Employer to attend the	
Date: Pl	lace:
Name:	

SIGNATURE OF THE APPLICANT: _____