

**UNDERTAKING
(for self funding and study leave without pay)**

I, bearing EID No.
son/daughter of hereby accept the offer of
scholarship from (Mention source of funding)
for studies in (Mention
the course) in (Mention institute and
country) for a duration of

I hereby undertake to:

1. Pursue the course and complete it within the duration specified in the Letter of Award No. RCSC/HRD(.....)/..... dated
2. Abide by all rules and regulations of the Royal Government and the institute concerned.
3. Not discontinue the course and/or leave the institute prior to completion of the course without written consent from the Royal Civil Service Commission.
4. Complete my training/studies, return to Bhutan and continue in the services of my Agency for a minimum duration equal to my study period, unless the Government in public interest transfers my services.
5. Forfeit my post-service benefits, if:
 - 5.1. I do not return to Bhutan upon completion of my training; or
 - 5.2. I return to Bhutan but voluntarily resign from my Agency without rendering the specified duration of service.

I hereby do confirm that I have been briefed on all rules governing my training and I have understood them, including the implication 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 prosecution in the Court of Law as per the provisions of the Penal Code of Bhutan.

Sd/-
(Affix Legal Stamp)

Place:
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, as the guarantor 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 actions by the Government.

Sd/-
(Affix Legal Stamp)

Place:
Date:

Name of Guarantor:

CID No:(attach copy)
Relation with the candidate.....
Occupation:.....
Present address:.....

Permanent Address:.....

Email address:

Contact No.:.....

Telephone:.....

Mobile:.....

Witness:

1)Signature.....Name.....CID. No.....