

Place:	Date:	Checked by	Section Officer (EOC)
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UNDERTAKING BY THE STUDENTS

I Mr./Miss _____ having a Registration /
Enrollment No. _____ and enrolled for the programme in
_____ at
_____ Campus do hereby understand and abide by the following terms:

1. I am not in receipt of any other scholarship from any other Institute/Organization for the Academic Year/s: _____.
2. I am not pursuing any other course from any other Institution for which I have applied for another scholarship.
3. I will approach to the Equal Opportunity Centre (EOC) of the Institute during the month of September / October 2026 for fresh and June/July 2027 for renewal OR whenever they call through phone/mail for submission of on-line or off-line scholarship application form.
4. I will be responsible for collecting the scholarship application forms from the concerned authority from my city/state and submit the filled-in application with required documents to the Section Officer, Equal Opportunity Centre (EOC).
5. I will be responsible for filling on-line/off-line application form before due date and submit the copy of on-line application with required documents (list attached) to the Section Officer (EOC).
6. In case of delay of scholarship application submission (on-line/off-line) or found not eligible for obtaining the scholarship, I will be responsible to pay my full applicable fees immediately.
7. If I receive the scholarship amount through Cheque/DD/ECS/DBT in favour of my name/account, I will be fully responsible to reimburse the full amount to the Institute. If I fail to return the scholarship amount, the Institute is liable to take any necessary action against me as per the rule.
8. I understand that in case I am found guilty of providing wrong information by me for misleading the Institute, the Institute is liable to take any necessary action against me at any stage/time, as per rules, including recovery of the scholarship amount / being blacklisted / debarred from any scholarship in the future.

I have gone through the terms carefully of the above undertaking and understand that these norms are for my own benefit and improvement. I also understand that if I fail to comply with these terms, the Institute will be liable to take suitable action as per Institute rules and law against me.

I undertake that I will strictly follow the above terms.

Name of the Candidate: _____

Permanent Postal Address: _____

City: _____ State: _____ Pin Code _____

Contact : e-mail Id : _____

Land-line No. with STD Code _____ Mobile _____

Place:

Date:

Signature of the Candidates

Section Officer (EOC)