

HRD Undertaking Form

Reference No.

Dated:

HRD Undertaking

I, Mr./Mrs./Ms.son/daughter/wife of Mr. Mrs
.....hereby accept the offer of fellowship/scholarship from (mention
sponsoring agency)for studies in(mention course) in.
.....(mention institute/university/city/country) for a duration of
.....

In this regard, I hereby undertake to:

1. Pursue the course and complete it within the duration specified in the letter of award No.....dated.....
2. Not change to another course or institute without the prior approval of the Company.
3. Abide by all rules and regulations of the Company 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 Company.
5. On completion of my training/studies, return to Bhutan and continue in the services of the Company for a minimum period twice the duration of the training/course.
6. Pay to the company an amount equal to the expenses incurred by the Company on my current training in the case I discontinue the training for a reason other than ill health and return to Bhutan.
7. Pay an amount equal to two times the expenses incurred on my current training, in the case I do not return to Bhutan from my training.
8. Pay to the company an amount equal to the expenditure incurred on my current training in the case I return to Bhutan but voluntarily resign from the services of the company prior to rendering the specified duration of service. The amount to be paid to the company shall be calculated on a prorated basis taking into account the period already served on return from the LTTP and the mandatory period remaining.

I, hereby 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 case 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 Company.

[Signature]

(Affix legal stamp)

Name:

Permanent Address:

Village:

Geog:

Dzongkhag:

Citizenship ID Card No:

In the event of any failure on the part of the above named person to abide by this undertaking I,holding citizenship ID card No.and a resident of(mention village/geog/dzongkhag) hereby, undertake to refund to the DCCL the stipulated amount or accept my liability to any other penalty as may be decided by DCCL.

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

[Signature of guarantor]

(Affix legal stamp)

Name of Guarantor:.....

Relation with the candidate:.....

Occupation:.....

Permanent Address:

Village:.....

Geog:.....

Dzongkhag :.....

Present Mailing Address :.....

Contact Phone No. :.....

(Affix legal stamp here)

(Affix legal stamp here)

Witness (employer)

Full Name :.....

Citizenship ID Card No.:.....

Designation :.....

Mailing Address :.....

Contact Phone No. :.....

Permanent Address:

Witness (employee)

Full Name :.....

Citizenship ID Card No.:.....

Designation :.....

Mailing Address :.....

Contact Phone No. :.....

Permanent Address