

## UNDERTAKING

I ..... S/D/O Sh ..... Registration No .....

Roll No..... Course.....Year..... Department/College

..... belongs to SC category. My Parents/Guardians income from all sources does not exceed RS.2,50,000/- . I hereby submit that I understand the terms & conditions for availing scholarship and I will reimburse the amount to the institution within 7 (seven) days after receipt of scholarship as per the Government guidelines. I will also abide by the Rules & Regulation framed by the Government or University.

Signature (Chairperson/Principal)

Signature of student