

M. T. & T. S. Programme

I hereby assure the director of the MTTS programme

- that I will abide by all the rules and regulation of the host institution
- that I will attend the programme for the entire period
- that, in case I have to leave on an emergency, I shall inform the local coordinator of the camp, take his permission for leave
- I agree to pay Rs. 10000 as compensation to the MTTS programme in case I leave the programme without permission
- that I do not have acute medical problems.

Name of the Candidate

Serial No.

Date

Signature

Guardian Signature

**Relationship with the
candidate**

Name, address and telephone number of the parents and local guardian (if any) to be contacted in case of an emergency.