



**BOND/UNDERTAKING FOR NUST PhD Fellowship (NPF) - PhDSCHOLARS**  
**(On Stamp paper worth Rs 100/-)**

1. I, Mr/Miss/Mrs. [ \_\_\_\_\_ ] son/daughter of [ \_\_\_\_\_ ] resident of [present and permanent address], do hereby undertake as under: -
2. At my request and for my benefits, approval for **NUST PhD Fellowship (NPF) with full Tuition Fee Waiver** has been accorded by NUST in my favour.
3. Now I, hereby undertake that
  - a. I will complete my PhD studies in the [discipline] with my full devotion and also make efforts to complete the said course within prescribed time without any failure
  - b. I am unemployed and will pursue my studies as full-time student (i.e. available at department during working hours in an ongoing semester).
  - c. In case of my employment during PhD studies, I will inform the institution and DASR accordingly.
  - d. In case of withdrawal (due to any reason) or employment, I will refund the amount of tuition fee incurred till that period in PKR.
  - e. In case of my withdrawal from PhD program due to any reason, my academic documents withheld by institution, shall only be returned back after necessary clearance from all stakeholders.
4. If I, fail to qualify the said course within the time prescribed by the NUST. I do hereby undertake to reimburse the tuition fee within a period of six months failing which the NUST will bear liberty to take Legal Action against me for recovery of amount of tuition fee as waived with a penalty at the rate of Rs 1000/- (Rupee one thousand only) per month till the final realization of tuition fee waived in toto.

Signature of Scholar: \_\_\_\_\_ Name: \_\_\_\_\_

CNIC #: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Present & Permanent Addresses: \_\_\_\_\_

Telephone #: Land line: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mobile: \_\_\_\_\_

**WITNESSES**

**Witness # 1 (also Guarantor)**

Signature: - \_\_\_\_\_

Name: - \_\_\_\_\_

Father's Name: - \_\_\_\_\_

CNIC # \_\_\_\_\_

Present & Permanent Addresses: - \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone# \_\_\_\_\_

**Witness # 2**

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

CNIC #: \_\_\_\_\_

Present & Permanent Addresses: - \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

**COUNTERSIGNED**

**BY PRINCIPAL/DEAN/COMDT**

**ATTESTED**

**BY NOTARY PUBLIC**