BOND/UNDERTAKING FOR FEE CONCESSION TO NUST EMPLOYEES FOR MASTERS/PhD STUDIES

(On Stamp paper worth Rs 100/-)

1.   I, Mr/Miss/Mrs [_____] son/daughter/wife of [_____] resident of [present and permanent address] have been granted admission in Masters/PhD in [Discipline   ] at [Institute   ] NUST, under Policy on Career Development of NUST Employees at my request and for my benefit, I do hereby undertake as under:-

   a.   That I will complete my Masters/PhD studies in the [discipline] with full devotion. I will also make efforts to complete the said course within prescribed On-Campus duration, for which I have been given full tuition fee waiver, without any failure on my part. After On-Campus duration I will not be entitled for fee waiver.

   b.   I will serve NUST for a minimum period of 02 (Two) years immediate after qualifying Masters and 03 (three) years immediate after qualifying PhD Degree in my present existing post or reimburse the waived off tuition fee and other expenditure incurred on my studies, if I am not recommended for induction as faculty member by NUST Selection Board after completion of my PG studies.

   c.   If I, fail to qualify the said course within the time prescribed by the NUST, I will reimburse the tuition fee and other incurred expenditure to NUST, failing which NUST will be at liberty to take Legal Action against me for recovery of spent amount.

   d.   I also undertake to take full faculty/office load during Masters/PhD studies.

   e.   NUST will be at liberty to take legal action against me for recovery of the spent amount if I fail to adhere to any of the above clause.

Signatures of Employee:-_____   **Head of Parent Institute /Directorate_____**

Name:-_____   NIC # _____

Father's Name:-_____   Present & Permanent Addresses:- _____

          _____

          _____

Telephone # Land Line:_____   Mobile: _____
Email:- _____

WITNESSES

Witness # 1   **Witness # 2**

Signatures:- _____   Signatures:- _____

Name:-_____   Name:-_____

Father's Name:-_____   Father's Name:-_____

NIC # _____   NIC # _____

Present & Permanent Addresses:-   Present & Permanent Addresses:-
_____   _____
_____   _____

Telephone #_____   Telephone #_____

          COUNTERSIGNED   **ATTESTED**
          BY Director/Principal/Comdt   **BY NOTARY PUBLIC**
          (of institute where admitted)