

MOIL Ltd.
SAKSHAM BALIKA SCHEME
Admission for GNM [3 years] Course / B.Sc.- Nursing [4 years] Course
at Apollo School of Nursing, Hyderabad

UNDERTAKING FROM PARENTS AND STUDENT

Date: / /2020

Mr/ Mrs. _____

parent of Ms. _____,

herewith voluntarily submitting **“The Undertaking”**.

I / We, the undersigned Parent / Guardian are aware that our daughter will be admitted for GNM [3 years] Course / B.Sc.- Nursing [4 years] Course at Apollo School of Nursing, Hyderabad under the Saksham Balika Scheme -2020 under CSR of MOIL Ltd.

I /We am /are permitting my/ our daughter with our full acceptance. I /We shall ensure that my daughter shall join the course she is selected for and abide by the terms and conditions under scheme as conveyed by MOIL Ltd. I / We further confirm that my daughter shall abide by all terms and conditions and obey the instructions of Apollo School of Nursing, Hyderabad.

Yours sincerely,

	Name	Signature
Father	: _____	_____
Mother	: _____	_____
Guardian	: _____	_____
Student	: _____	_____

➤ Mention if, your ward is under any medication / medical treatment. _____

➤ Contact Address: _____

➤ Contact Nos. Mother : _____ Father : _____

Residence : _____ Guardian : _____