

| Date: |  | 1 |
|-------|--|---|
|       |  |   |

| Name:         | FILL IN BLOCK LETTERS |               |             | Date of Birth: | / | / |
|---------------|-----------------------|---------------|-------------|----------------|---|---|
|               | (First Name)          | (Middle Name) | (Last name) |                |   |   |
| Department:   |                       | Se            | emester:    |                |   |   |
| Enrollment N  | lo:                   | A             | adhar No:   |                |   |   |
| Mobile No:    |                       | House Phone:  |             | E-mail:        |   |   |
| Previous Educ | ation:                | Score:        | Year:Inst   | itution:       |   |   |

## **UNDERTAKING**

| I,, with the Enrollment No:   |
|---|
| have understood the rules & regulations and the placement assistance policy of Indrashil University (IU),     |
| which will be rendered to me upon my successful completion of my course. I hereby express my willingness to   |
| be a part of the student to get the placement assistance as per the placement assistance policy of IU. I also |
| know that the placement may require the relocation or travel based on the place of the company where my       |
| placement had been secured, and I am hereby state that I will attend all interviews arranged by the institute |
| for my placement also will not reject the offer I received from the company with any reason.                  |
| Signature of Student:   |
| Name & Signature of Dean / HOD:   |

Placement Officer's Sign & Date:\_\_\_\_\_