



**O.P. Jindal Global University**  
A Private University Promoting Public Service

## **Jindal Global Summer School (JGSS)**

### **Letter of Undertaking**

I, \_\_\_\_\_, son/daughter of \_\_\_\_\_, hereby acknowledge and agree to the following:

1. I have enrolled as a participant for the Aspire India Summer Programme (AISP)/ Aspire India Immersion Programme (AIIP) (~~strike out whichever is not applicable~~) being organized by O.P. Jindal Global University (JGU) and have paid the requisite fees for the programme.
2. I acknowledge that I am bound by and will follow JGU's code of conduct for students and all academic and disciplinary regulations of the university.
3. I will perform my work to the best of my abilities and will conduct myself in a manner expected of a student.
4. I acknowledge that risks associated with staying away from home and at JGU. I acknowledge that any necessary medical treatment, to the extent not feasible, financially or otherwise, by JGU shall be at my own expense.
5. In consideration of my participation in the programme, I do hereby, for myself, my heirs, administrators and executors, acknowledge and assume any risks of the programme, and do hereby release and forever discharge JGU and all its officers, employees, volunteers, students and agents, whether participating in the programme or otherwise, for any and all claims, demands, actions or causes of action, on account of any injury to me, including death or damage to or loss of property, or on account of damages suffered by me for whatever reasons, which may occur from any cause, including negligence, in connection with the programme or any continuances of extensions thereof.
6. I do hereby expressly agree to refrain from bringing any suit or proceedings at law or otherwise as provided by law, against JGU or any of its component entities or individuals, employees, officers, agents or students on account of any or all such claims, demands, actions, or causes of action arising out of participation in the programme.

Name of the Student: \_\_\_\_\_

Date: \_\_\_\_\_

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

Name of the Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of the Parent/Guardian: \_\_\_\_\_