



Higher College of Technology

STUDENT UNDERTAKING

I, the undersigned, (ID)
Department of do not want to continue my study
in the level.

This is because of
therefore I would be glad if you kindly allow me to take the OJT / Enhancement
training in order to get my level certificate.

Thank you.

Student's Signature: _____ Date: _____

Advisor' name and Signature: _____ Date: _____

OJT/EPT Coordinator (Name and Sig.): _____ Date: _____

Head of Department (Name and Sig.): _____ Date: _____

Received by Students' Affair _____ Date: _____