
Affidavit of Undertaking For Students

State of [State Name]

County of [County Name]

I, [Your Full Name], of [Your Address], being duly sworn, depose and state:

1. **Affiliation and Identification:** I am a student at [School Name], currently enrolled in [Your Course/Major], with the student identification number [Your Student ID].
2. **Purpose of Affidavit:** This affidavit is executed in accordance with the requirements of [Specify the Requirement, e.g., Scholarship Name, School Policy, etc.] to affirm my commitment and understanding of the obligations and responsibilities imposed upon me.
3. **Commitment to Conditions:**
 - I hereby undertake to maintain a minimum GPA of [Required GPA] each semester to qualify for the continuation of my scholarship.
 - I commit to adhering to all the rules and regulations set forth by the university, including but not limited to the Academic Honesty Policy and Student Conduct Code.
 - I will attend all required meetings, seminars, and workshops as part of my academic program or scholarship requirement unless excused for valid reasons.
4. **Declaration of Compliance:**
 - I declare that I will not engage in any activities that may be deemed contrary to the ethical standards and practices of [School Name].

- I affirm to utilize any funds, resources, or privileges granted to me solely for purposes that advance my education and benefit my academic progress.

5. Acknowledgment of Consequences:

- I understand that failure to meet these undertakings may result in disciplinary actions, revocation of my scholarship, or other penalties as deemed appropriate by [School Name].

6. Oath of Truthfulness:

- I affirm that the information provided in this affidavit is true and correct to the best of my knowledge and belief. Any intentional misrepresentation of facts may subject me to the penalties of perjury as well as other disciplinary measures by [School Name].

Sworn to (or affirmed) and subscribed before me this *[day]* day of *[month]*, *[year]*, by *[Your Name]*, who is personally known to me or who has produced identification in the form of *[type of government-issued ID, e.g., driver's license, passport]*.

[Signature of Notary Public]

Notary Public, State of *[State Name]*

My commission expires: *[Date]*

[Signature of Student]

[Your Name]