**Undertaking Form**

**This is to certify that I, Mr/Ms……………………………………. Student of ………………………….………………..at………………………………………………..**

**…………………………………… and chosen as CSIR-CGCRI Summer Intern 2020 will continue for a period of ………………………weeks and not seek early release before Six weeks or extension after Eight weeks.**

**I will also not seek Interim leave for examination or any other academic reason.**

 **Signature with date**

**(Name)**