

## **Format for Surety Bond (on Non-Judicial Stamp Paper of Rs. 100/-)**

[Your Name]

[Your Address]

[City, State, PIN Code]

[Email Address]

[Phone Number]

[Date]

[Mangrove and Marine Biodiversity Conservation Foundation of Maharashtra]

[302, Wakefield House, Ballard Estate, Above Britannia & Co. Restaurant, Fort]

[Mumbai- 400 001, Maharashtra]

Subject: Affidavit of Surety for Foreign Scholarship Programme by Mangrove Foundation.

I, [Surety Provider's Full Name], solemnly declare and affirm the following:

1. I am a resident of [City, State, Country], with an address at [Surety Provider's Address]. I am of legal age and possess the legal capacity to act as a surety.

2. I hereby affirm my commitment to acting as a surety for [Student's Full Name] in relation to their application for the [Name of Scholarship Program] at [Scholarship Institution Name]. I fully understand the responsibilities and obligations associated with this role and undertake to fulfill them diligently.

3. I understand that by providing this Surety Bond, I am guaranteeing the performance and compliance of the Student with all terms and conditions outlined by the scholarship program and the institution.

4. I commit to ensuring that the student maintains satisfactory academic progress throughout the duration of the scholarship program.

5. I understand that it is my responsibility to promptly inform the scholarship institution of any changes in my financial circumstances that may affect my ability to fulfill the obligations outlined in this Surety Bond.

6. I acknowledge that the scholarship institution reserves the right to terminate this Surety Bond in case of any breach of the terms and conditions of the scholarship program by the student. I will comply with any termination decisions made by the scholarship institution and understand that I may be held liable for any outstanding financial obligations resulting from such termination.

7. I agree to indemnify and hold harmless the scholarship institution, its officers, employees, and representatives from any claims, damages, or liabilities arising out of my obligations under this Surety Bond.

8. I declare that the information provided in this Affidavit of Surety is true, accurate, and complete to the best of my knowledge. I understand that any false or misleading information may result in the rejection of the scholarship application.

9. I understand that this Affidavit of Surety is a legally binding document, and I am fully aware of the legal consequences of my obligations and responsibilities as a surety.

Signed this [Day] day of [Month], [Year].

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[Surety Provider's Full Name]