

To be submitted on Judicial Stamp Paper of ₹ 50/- (if it is prepared in India only)

OR

Equivalent Legal Procedure as per Judicial norms at concerned Country of NRI Sponsor

To,
The Director
Institute of Pharmacy
Nirma University
Sarkhej – Gandhinagar Highway. Ahmedabad

Subject : Sponsorship – Undertaking of the Sponsor for Academic Year – 2024-2025.

Sir,

I, Mr./Ms. _____, am residing at _____ (foreign address)

since _____. I, hereby, sponsor Mr./Ms. _____ (herein after called as the 'student'), residing at _____, who is my _____ (*) and is dependent on me, for the purpose of financing education leading to Doctor of Pharmacy (PharmD) under Institute of Pharmacy, Nirma University.

I hereby agree and affirm and declare that, if the said student is granted admission in the above course under the Institute of Pharmacy, Nirma University for pursuing the course of PharmD then I agree and undertake to pay the fee of **US \$5000** per year for I to IV year and **US \$5500** per year for V & VI year or equivalent Indian Rupees in advance every year for the total period of the programme in which he/she is to be admitted.

I also undertake that if the fee is increased for more than the **US \$5000 / US \$5500** or equivalent Indian Rupees per year, I will pay the same at the increased rate and I shall deposit the additional amount. I will also be fully responsible for the total financial support including all the expenses on academic/living and other incidental expenses.

I also hereby confirm that I work as _____ at _____ (firm) and I earn an annual income of US \$ _____ (Approx.) or equivalent Indian Rupees.

Yours faithfully,

(Name & Signature of the Sponsor) Date: _____ Place : _____

The above declaration is duly notarized by Mr./Ms. _____, Notary Public.

Signature of the Notary Public _____

Stamp of the Notary Public

[(*) The relationship of the candidate seeking admission with the sponsor is required to be mentioned here]