

## Undertaking For Using Hearing Aid

I.....

Do hereby state that my hearing impairment is .....% as per the medical certificate issued by.....  
.....

As the impairment is of permanent nature, the use of hearing aid is essential in all examinations. I assure that I will not use the device for any unfair means during the examinations and if found otherwise, University may forfeit my rights and claims thereof.

Place:

Yours's Faithfully,

Date:

(Signature)

Name and Address of the candidate