

Education Malaysia Global Services 20th Floor, Menara TA One 22, Jalan P. Ramlee 50250 Kuala Lumpur

LETTER OF UNDERTAKING

To: Education Malaysia Global Services	
Date	
Student Name / Dependant Name:	
Passport Number:	Country of Origin:
EMGS Reference Number:	Contact Number
Corresponding Address	Email
I declare that in the event I should be diagnosed with any condition that does not require my removal from the country but requires medical treatment and I choose to remain in Malaysia to continue my studies I will bear any and all costs relating directly or indirectly towards the medical management of my medical condition. I confirm that EMGS shall not be responsible in any manner or whatsoever, arising out of EMGS	
certification of my medical status as suitable to stud described above. I further undertake to hold EMGS decision and agree to indemnify and keep EMGS from	
Signature	
Name	