

**ANNEX II  
LETTER OF COMMITMENT  
South-South Cooperation Grant Programme  
AGCID – Universidad de Chile**

As a candidate for the Diploma in Seismology, to be held between June and August 2020 at the Universidad de Chile:

| \_\_\_\_\_

*Applicant Name*

FROM \_\_\_\_\_

*Origin Country*

**I declare that all information presented is true, correct and complete and in case of obtaining the grant, I agree to respect the following rules:**

- a) Comply rigorously with the Diploma Programme.
- b) Accept all the conditions stipulated in relation to the Diploma.
- c) Respect the instructions given in the Diploma development.
- d) Do not extend the training period established by the Universidad de Chile and AGCID.
- e) At the end of the course return to my home country in accordance with the agenda established by the Universidad de Chile and AGCID.
- f) Not be accompanied by any member of my family or another person.
- g) No to participate in the course, in case of illness or pregnancy, if my permanence as a participant is inadvisable.

- h)** Accompany a medical certificate that certifies good physical and mental health compatible with the Diploma.
- i)** Do not interrupt the course except for any serious illness that determines inability to continue training.
- j)** Not have an extrajudicial order of any case of a legal nature that could prevent my departure from the country or to enter Chile.
- k)** To have the necessary international documentation to enter and leave Chile, according to bilateral agreements between governments, during the Diploma entire period, including the travel dates determined by the grant.
- l)** Upon returning to my institution, carry out knowledge transfer activities and implement my Diploma completion project.
- m)** In case of withdrawing from participating in the Diploma, once selected, notify the AGCID Focal Point at least ten days before the start of the Diploma and indicate the reasons of force majeure that force that decision.

\_\_\_\_\_ , \_\_\_\_\_ of \_\_\_\_\_ , \_\_\_\_\_ .  
**(Place) (Day) (Month) (Year)**

\_\_\_\_\_  
**Applicant Signature**