

BOND

BY THIS BOND I, _____ the Obligor (f/n if Indian)

of _____ (Full Residential address)

_____ (Full Postal address)

Phone Contact: _____

Passport No. _____ acknowledge myself bound to the **GOVERNMENT OF THE FIJI ISLANDS**

(hereinafter the "Government") for the sum of _____
(Bond amount in words)

dollars (F\$ _____) to be paid by me to the Government being the total sum to be expended by the Government for my training.

SIGNED, SEALED and DELIVERED by

The said _____) _____

this _____ day of _____ 20 _____) _____
(Obligor)

WHEREAS the Government has used its good offices to source for me training in (Programme/Major)

_____ at

(Institution/Country) _____

and provided the means to enable me to study there;

CONDITIONS OF BOND

1. That the Obligor must work in the country upon completion of the said training as a _____ or in such capacity as the Government may direct for a period of _____ or such shorter period as the Government may determine calculated from the completion of the said training;
2. If the Government is unable to offer the Obligor employment or, at its discretion, the Obligor may seek alternative employment with a statutory body, public corporation, private company, or any other local institution within the Fiji Islands with the prior approval of the Government and the conditions set out in paragraph 1 hereto applies *mutatis mutandis* to such employment. This paragraph does not apply to In-service scholarship who must immediately return to the employment of the Government of Fiji after completion of their studies;
3. If the Obligor does not serve the country of the Fiji Islands for the period referred to in paragraph 1, or if the Obligor does not serve the country as per paragraph 2, then the Obligor must pay to the Government in one single payment, an amount not exceeding the total amount of the above-written bond as the Government may determine in its discretion under this bond, together with interest at the rate of 10% per annum;
4. If the Obligor wishes to invoke paragraph 3 for the purposes of migration or otherwise, the Obligor is liable to pay to the Government the sum owing, in a single payment prior to migration or in undertaking a course of action which prevents the Obligor from fulfilling his or her obligations under this bond; and
5. If the Obligor's scholarship is terminated due to his or her own negligence and/or misconduct prior to completion of studies, the Obligor is liable to reimburse the Government the total sum spent, by reason of this Bond, as at the date of termination.

But in the event of my failing to fulfil the above-mentioned conditions where applicable, the above-written bond shall remain in full force and effect notwithstanding no demand be made by or on behalf of the Government of Fiji.

SIGNED, SEALED and DELIVERED by the)
said _____)
this _____ day of _____ 20 ____)
after the contents hereof were first explained)
to them in the English/Fijian/Hindi language)
and they appeared fully to understand the same.)

(Obligor)

Before me:

(Signature of Public Officer*)

Date: _____

(Name of Public Officer)

Occupation: _____

Address: _____

Phone No. _____

*Public Officer of/above the level of Administration Officer.

GUARANTEE OF BOND

WE, (1) _____ of _____
(full Residential and Postal Address)

Phone No. _____ (Home)

Phone No. _____ (Work)

Occupation # _____

Employer _____

FNPF No. _____

Passport No. _____

and (2) _____ of _____
(full Residential and Postal Address)

Phone No. _____ (Home)

Phone No. _____ (Work)

Occupation # _____

Employer _____

FNPF No. _____

Passport No. _____

Hereby jointly and severally GUARANTEE the aforementioned bond dated the _____ day of _____ 20 _____

given by _____ to the Government of Fiji to pay the sum of
(Name of Student)

_____ dollars (F\$ _____)
(Bond amount in words)

SIGNED, SEALED and DELIVERED

by the said (1) _____

(1) _____

and (2) _____

(Guarantor)*

this _____ day of _____ 20 _____

after the contents hereof were first explained to

them in the English/Fijian/Hindi language and

they appeared fully to understand the same.

(2) _____

(Guarantor)*

Before me:

Full name of witness **

Signature

Position/Occupation _____

Date: _____

Address: _____

Phone No. _____

* Spouses will not be accepted as guarantors.

** One of the following should witness the bond: MP, Justice of Peace, Public Officers of or above the level of Administrative Officer, Member of Town or Provincial Council, Magistrate, Barrister and Solicitor, Notary Public, Minister of Religion, Bank Officer, Medical or dental Practitioner, Education Officer, Officer or Non-Commissioned Officer of Fiji Military Forces, Officer not below the rank of Corporal in Fiji Police Force, or University Graduate.

Copy of most recent pay slip/salary advice should be attached.