**UNDERTAKING**

To

Embassy of India,

…………………………………………….

**Subject: Consent Form for evacuation from…………………………………………………… (City, Country)**

1. I,…………………………………………………………………………………………………………………..(name, city, country) holding valid Indian passport…………………………………………………………………(passport number), confirm my willingness to return to India.
2. I confirm my readiness to follow all instructions given by the officials of Government of India/Embassy of India/Aircraft crew/medical personnel on arrival.
3. I am also willing to undergo a 14 days mandatory quarantine on my arrival in India at my own expense as per the protocols framed by the Government of India.

**(Signature with date)**

**Name……………………………………………………….**

**Passport Number………………………………………….**

**Mobile………………………………………………………….**

**Email…**…………………………………………………………..