



AGREEMENT OF UNDERTAKING TO COMPLETE A REMOTE TECKCHEK

l,	(Please print Full Name),	
Identity No	do hereby agree that I undertake to complet	te a
remote Teckchek under the	Adcorp Professional Services, and all its subsidiaries (APS), facility	
provided to me by said APS	provided however that such information will only be given by me and	1
that such information be tr	ated as confidential.	
APS will accept such inform	tion on the understanding that the results received from the said	
Teckchek is completed by t	e abovementioned person and no one else.	
The passwords and links gi	n to conduct the Teckchek will be provided and has an expiry limit.	
Signed,		
 Signature	 Date	













