THIS AGREEMENT made at Pune on this day of, two thousand and, between Coditas Solutions LLP, a limited liability partnership
incorporated under the Indian law (hereinafter referred to as "Coditas" or "Company") and having its corporate office at X13, Konark Campus, Viman Nagar, Pune 411014 of the First Part and
S/o D/o W/o
aged years, an nationality residing at

Signature of the Surety

Signature of the Employee

	and naving per (hereinafter			as	"Mr./Ms.
") of the Second	•				,
AND WHEREAS Dr./Mr./Miss/Mrs.					
at					
for the said Mr./MsSurety")		(hereinaf	ter ref	erred t	o as "The
AND WHEREAS the Company and the sagreed to the terms and conditions he event of the breach of the agreement.					
IT IS NOW HEREBY AGREED AS UNDER:					
1. Coditas is involved in the business of S  – offering services both in India and specialized skill set that can be acquire training ("Training"); whereas the Traini Indirect, financial and unliquidated – rel of Mr. /Ms.  substantially improves the profes and it has been im investment. Coditas expects a commitme expenditure or seek a penalty for non-fu	abroad, which reed through specialing involves considered to faculty, considered to faculty, considered by Coditalent (elaborated be	equires its end training and derable experomputer time while under sold of Mr./I sold of the elow) from the	nployed d/or sp nditure , suppo Trainin Ms rable e	es to poecific  both  ort facili  g. Thi	oossess the on the job direct and ities, Salary is Training ture as an
2. The said Mr./Ms Company faithfully and diligently for a pay period and/or unauthorized absence	period of 12 (twe	elve) months	(exclud	ing Lea	
3. During employment with Coditas Mr. employed by or perform consulting or case Mr./Ms Coditas shall be liable for termination.	other services for	any other hi	isiness	entity	or narty In
4. The said Mr./Msliquidated damages 50% of the offered voluntarily resigning from the services of before expiry of the bond period and agrees that the amount of the liquidate debt due by him to the Company.	d/payable CTC + G of the Company or the said Mr./Ms.	SST post offer violating the	r in the terms	e event of this	of his/her agreement further
5. The Company reserves the right t			-		d Mr./Ms.

is found to be inefficient or incompetent in the discharge of
his/her duties or for dishonesty, fraud or any misconduct or for the breach of the rules and regulations of the Company or for any circumstances which in the opinion of the management of the Company warrant such action and the decision of the Company shall be final and binding.
6. The said Surety Dr./Mr./Miss/Mrs residing at
provided by Mr./Ms.
shall be a near relative/person in order of preference and
hereby guarantee the repayment of the debt due by the said Mr./Ms.
in accordance with the provisions of this agreement and agree and undertake
that he/she shall be liable to the Company for the repayment of the said debt in the event of the
said Mr./Ms failing to repay the debt to the Company on demand. It is hereby further mutually agreed and declared that the said Surety
Dr./Mr./Miss/Mrs not be discharged or released from the
guarantee by any arrangements made between the said Mr./Ms
and the Company with or without the assent of any of the said Surety or by
any forbearance whether as to payment time, performance or otherwise.
As a token of the consent, he/she has signed this agreement as Surety:
Signed by Surety:
Dated this:
Signed and delivered by Mr./Ms
Accepted for and behalf )
of Coditas Solutions LLP )
by their Constituted Attorney )

## **Surety Verification**

This is to certify that I, Dr./Mr./Miss/Mrs	(Name of	
the Surety) am standing surety for Mr./Ms	(Name	
of the Employee) who is my	(Relationship). Mr. /Ms.	
(Nan	ne of the Employee) has joined Coditas	
	_ (Employee's date of joining) and executed	
an agreement on (date of execution of this Agreement		
	(Name of the Employee)	
_	, I stand guarantee and will be liable to the	
liquidated damages as stated above. My perr	nanent address is as follows:	
N		
Name (of the Surety):		
Address (of the Surety):		
Address (of the Surety).		
Phone (of the surety):		
Frione (or the surety).		
(With country and area code)		
, , , , , , , , , , , , , , , , , , , ,		
(Signature of the Surety)		
(Signature verification by competent authori	ty)	