

**De La Salle Medical and Health Sciences Institute**

City of Dasmariñas, Cavite  
PROMISSORY NOTE / AFFIDAVIT OF UNDERTAKING

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**PROMISSORY NOTE**

I/We, \_\_\_\_\_ promise to pay the balance of tuition fee for the \_\_\_\_\_ semester SY \_\_\_\_\_ with a total of \_\_\_\_\_ (amount in words) (₱ \_\_\_\_\_) under the optional installment term of \_\_\_\_\_ (state the applicable installment term).

Course: \_\_\_\_\_ Year Level: \_\_\_\_\_  
Amount: \_\_\_\_\_ Date: \_\_\_\_\_  
Student's Signature: \_\_\_\_\_ Parent's/Guardian's Signature: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ Parent's/Guardian's Name: \_\_\_\_\_

.....  
**AFFIDAVIT OF UNDERTAKING**

I, \_\_\_\_\_, Filipino, of legal age, and a resident of \_\_\_\_\_, after having been duly sworn in accordance with law hereby depose and state that:

1. I have applied for an optional installment term and is executing the above promissory note for \_\_\_\_\_ <name of student>.
2. Our family is currently experiencing financial difficulty due to \_\_\_\_\_.
3. I am submitting a photocopy of my government-issued ID (with picture) together with this affidavit.
4. In case of default and engagement of a collection agency, I agree to reimburse DLSMHSI the fees of the collection agency which maybe based on the percentage of the accounts, and all costs and expenses that maybe incurred.
5. I am executing this affidavit to attest to the truthfulness, veracity and due execution of the foregoing statements and this document.

Affiant further sayeth naught.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Affiant (Signature over Printed Name) (Date) (Place)

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of \_\_\_\_\_ 2020 at \_\_\_\_\_ affiant exhibiting to me her \_\_\_\_\_ issued on \_\_\_\_\_, 2020 at \_\_\_\_\_.