**JOINT AFFIDAVIT OF UNDERTAKING**

WE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of the Phil. Recruitment Agency)

A duly licensed private recruitment agency existing under the laws of the Philippines and registered with the Department of Labor and Employment (DOLE), Philippines, with office address at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, represented by \_\_\_\_\_\_\_\_\_\_\_\_\_ (*name of agency representative and position).*

And

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of the Company)

A duly registered company/principal operating under the laws of Qatar, with office address at \_\_\_\_\_\_\_\_\_\_\_\_\_ represented by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*name and position of agency rep*), do hereby depose and state:

1. That we have applied for accreditation for the recruitment and deployment of Overseas Filipino workers.
2. That we shall comply with the issuances/mandates of the Department of Migrant Workers (DMW)/Philippine Overseas Employment Administration (POEA).
3. That as one of the conditions for continuous implementation of that aforementioned privileges we jointly undertake to:
4. Assure faithful implementation of the terms and conditions stipulated in the Employment Contract;
5. Allow the hired Overseas Filipino Workers (OFW) to notify the Migrant Workers Office (MWO), Philippine Embassy/Consulate Office of his/her arrival within two (2) days of such arrival;
6. To monitor the status or condition of our hired Filipino workers and submit report to DMW Migrants Workers Office (MWO), in Qatar of significant incidence as provided in the POEA/DMW Rules and Regulations; and
7. To assume full and complete responsibility for all consequences which may arise in connection with the said accreditation/ registration.
8. That no deductions shall be made from the regular salary of the OFW other than that compulsory contributions prescribed by law.

IN WITNESS WHEREOF, we have hereunder sign our name and affix our signatures this \_\_\_\_\_\_\_\_\_\_\_\_\_ .

For in behalf of: For in behalf of:

**Name of company** **Name of Phil Agency**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(name and position of company rep. (name and position of agency rep