

## **AFFIDAVIT OF UNDERTAKING**

I, \_\_\_\_\_, of legal age and a resident of \_\_\_\_\_, an employee and **Authorized Personnel** of \_\_\_\_\_, duly accredited by DOLE-RO \_\_\_\_\_, to transact with for and in behalf of our client employers and/or foreign nationals for their Alien Employment Permit applications and related documents, do hereby agree and undertake to abide and be bound by the following:

1. Adhere and comply with the provisions of **DOLE Department Order 221 series of 2021**, and **Department Order 221-A series of 2022**, and existing rules and regulations in the application for an AEP, Certificate of Exemption and/or Certificate of Exclusion;
2. Commit to serve only legitimate clients and shall not use my appointment for any unlawful purpose in applying for AEP, Certificates of Exclusion and Exemption other than those to be employed by our company's clients;
3. Submit only valid and updated documentary requirements, whether for clients or personal which pertain to my appointment and role as an Authorized Personnel (AP);
4. Ensure my attendance to the Training/Seminar to be conducted by DOLE relative to and all matters pertaining to AEP Guidelines;
5. Present upon entry and wear at all times my Accreditation ID while in the DOLE premises for proper identification, and the photocopy of which shall be attached in all applications I facilitate for processing;
6. Submit immediately a notification of any changes in my personal contact details through my employer Agent; and
7. Submit myself to any and all liabilities that may arise from any and all unlawful act/s I committed, including documents found to be fraudulent or tampered with as submitted to DOLE.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the City/Municipality of \_\_\_\_\_.

\_\_\_\_\_  
**Affiant**

Government ID: \_\_\_\_\_

Issued on: \_\_\_\_\_

Issued at: \_\_\_\_\_

**SUBSCRIBED and SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ Affiant having exhibited to me the ID indicated above.**

Doc. No. \_\_\_\_\_

Page No. \_\_\_\_\_

Book No. \_\_\_\_\_

Series of \_\_\_\_\_