

REPUBLIC OF THE PHILIPPINES )  
CITY OF \_\_\_\_\_ ) S.S.

**UNDERTAKING OF THE EXCHANGE VISITOR PROGRAM PARTICIPANT**

I, \_\_\_\_\_, of legal age, single/ married, and a resident of \_\_\_\_\_, a Filipino citizen, with contact number +63 (09\_\_\_\_) \_\_\_\_\_, on oath depose and say; **THAT:**

1. I am traveling to the United States of America (U.S.A.) on a J1 Visa to participate in the Exchange Visitor Program (EVP);
2. I have a clear understanding that participation in the EVP is for educational and cultural exchange participation and not for purposes of acquiring employment or immigrating to the U.S.A.;
3. I fully comprehend, that after my program has ended, I have to return to the Philippines to comply with the two-year home-country residency requirement of the EVP program. I am also aware of the possibility, that I may have no employment to return to, upon my return to the Philippines;
4. I am aware that as an EVP participant, not an Overseas Filipino Worker (OFW), I am not entitled to benefits given to OFWs, provided by the Overseas Workers Welfare Administration (OWWA);
5. I understand the personal risks involved in participating in the EVP; and
6. I am sufficiently insured during the duration of the program and the insurance includes the medical management for SARS-CoV-2 and other diseases, repatriation of remains, and medical evacuation to the Philippines.

**IN WITNESS WHEREOF**, I hereunto set my hand this \_\_\_\_\_ day of \_\_\_\_\_, 2021 in the City of \_\_\_\_\_, Philippines.

\_\_\_\_\_  
*(Signature over the printed name of the Affiant)*

CDI No. : \_\_\_\_\_  
Issued at : \_\_\_\_\_  
Issued on : \_\_\_\_\_

**SUBSCRIBED AND SWORN TO BEFORE ME**, this \_\_\_\_\_ day of \_\_\_\_\_, 2021 in the City of \_\_\_\_\_, Philippines.

Doc. No. : \_\_\_\_\_  
Page No. : \_\_\_\_\_  
Book No. : \_\_\_\_\_  
Series of : \_\_\_\_\_