

<p>NURSING OFFICERS</p> <p>GUARANTOR ACCEPTANCE FORM</p>
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NO/GAF/01.12.17

Date :/...../.....

*The Manager,
Loans Section,
Mauritius Civil Service Mutual Aid Association Ltd,
5 Guy Rozemont Square,
Port Louis.*

Dear Sir,

RE : GUARANTOR ACCEPTANCE

I / We, the undersigned agree to stand as guarantor(s) for Mr / Mrs / Miss who applied for a loan of Rs with the Mauritius Civil Service Mutual Aid Association Ltd on despite the fact that the person is a **Nursing Officer**. Consequently, as guarantor(s), we undertake to repay in full to the Mutual Aid Association any balance which may be due in case the loanee fails to repay the said loan.

Yours faithfully,

	GUARANTOR 1	GUARANTOR 2
NAME		
NID		
SIGNATURE		
DATE		

	GUARANTOR 3	GUARANTOR 4
NAME		
NID		
SIGNATURE		
DATE		

(To call in person and sign in the presence of a Senior Operations Officer or above).