

## Affidavit

I, \_\_\_\_\_ of  
(Full name of the declarant)

\_\_\_\_\_ (permanent address of the declarant)

holder of National Identity Card No. \_\_\_\_\_ working at the  
(NIC No.)

Uva Wellassa University of Sri Lanka as an \_\_\_\_\_ being  
(present full designation)

a \_\_\_\_\_, do hereby solemnly, sincerely, truly certify, declare and affirm that I am the  
(Race)

declarant of above name and the information furnished by me in the application for  
\_\_\_\_\_ is true and  
(title of the application)

accurate to the best of my knowledge. I know that my application will be rejected as well as a disciplinary action will be taken against me in case of reveling the information provided by me is not satisfactory and or false. Also know that I am liable to a penalty for submission of false information to a maximum of misappropriation of funds cause to interdict from the job as well as refunding all money which I have been paid for this purpose according to the rules and regulations. Further I agree that the relevant concessions will be recovered from me and liable to any penalty under the prevailing terms and conditions if information furnished by me is found to be false before or after recommendation or approval of the \_\_\_\_\_

\_\_\_\_\_ application.  
(title of the application)

I faithfully filled the said application and discharge the rules and regulations of the \_\_\_\_\_  
\_\_\_\_\_ in accordance  
(title of the application)

with the Constitution of the Democratic Socialist Republic of Sri Lanka and the law, and that I will be faithful to the Republic of Sri Lanka and do the best of my ability to uphold and defend the Constitution of the Democratic Socialist Republic of Sri Lanka.

(Rs. 50/- stamp should be pasted and  
should place the signature above the stamp)

\_\_\_\_\_  
Signature of the Declarant

The foregoing was read over and explained to the above declarant and having understood the content, he placed his signature before me

at \_\_\_\_\_  
(Name of the Place/ Institution)

on this \_\_\_\_\_ day \_\_\_\_\_ 20 \_\_\_\_\_  
(date) (month) (year)

Signature \_\_\_\_\_  
(formal signature)

Name and Designation \_\_\_\_\_  
(Name with initials and designation of the attester with official seal)  
Vice-Chancellor, Deans of Faculties, Registrar, Librarian, Bursar