	FORM A							
OFFICE USE								

Admission Branch

University of Jaffna, Sri Lanka DECLARATION

Registration	No: .				• • • • •				• • • • •										
Full Name:																			
Course of Study:																			
Faculty:					• • • • •														
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Tamil:																			
Sinhala:																			
 Copy of the National Identity card should be attached. Evidence and Affidavit should be attached if there is any discrepancy between the name in the personal file at the time of registration and the name indicated above to confirm that both of the names indicate one and the same person. 																			
Signature of the Student													Date	e					