 Form A

Office Use

ADMISSION BRANCH

University of Jaffna, Sri Lanka

Declaration

Registration	No:																		
Full Name:																			
Course of Study:																			
Faculty:																			
Name to appear in degree certificate in the following manner																			
I do hereby confirm that the full name written below is spelt correct and the correct order to appear in the degree certificate. I understand that there will not be any certificate issued to me again under any circumstances what so ever.																			
English:																			
Tamil:																			
G: 1 1																			
Sinhala:																			
There will not be any changes in the English name (spelling) which is given at the time of registration or is used in the records maintained at the admissions branch.																			
			•												• • • •				
Signature of the Student									Date										