	FORM A
OFFICE USE	

Date

## 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: 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