ANNEXURE – 5

AFFIDAVIT (By IP – only in case of female candidate)

	That deponent is an employee with the factory / establishment, vizcovered under ESI Act vide Code No
	The Deponent is a beneficiary under ESI Act. having Insurance No
2.	The deponent's daughter (Name:) is years of age.
3.	, , , , , , , , , , , , , , , , , , , ,
	dependent on the earnings of Insured Person.
4.	The deponent hereby declares that aforesaid facts are correct on the basis of the record and if the aforesaid declaration is found to be incorrect and contrary to the records, the admission sought shall be declared illegal and liable to be cancelled.
5.	
	DEPONENT
	VERIFICATION
	VERIFICATION I swear by this Affidavit that the contents of my above affidavit are true and correct to my knowledge and belief. No part of it is false and nothing relevant has been concealed therein.
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