

To,
The Managing Director
NWAC, Regional Office
309-310 III floor R G Trade Tower Netaji Subhash Place
Pitampura, New Delhi 110034

AFFIDAVIT

I _____ Date of Birth _____ Son/Daughter of _____
(Student's Name) (DD/MM/YEAR) (Father's Name)

Resident of _____
(Address of the Student)

Presently at _____
(Specify state name where this affidavit is attested by oath commissioner if the residential address of student is not present in that state)

do hereby solemnly affirm and declare as under: -

1) That I have passed Grade _____ on _____
(Mention Class/Grade Passed) (Mention Examination Month & Year)
from _____
(School Name - accredited by Northwest Accreditation Commission, formerly Northwest Association of Schools and College, USA)
with the Roll No. _____
(Mention Roll No of the Student)

2) That I have lost/misplaced my all educational documents (Diploma/Mark Sheet/Character, Migration, Transfer and Academic Verification Certificate) concerning above mentioned Diploma Programme and submitting this affidavit to issue me Duplicate Copy of the same **including/excluding** diploma certificate.
(Score out whichever is not applicable)

3) I hereby agree and undertake that in case I receive/find my High School Diploma Certificate at any later date in future, I shall return the same to the NWAC, Regional Office at its office address at 309,310 3rd floor, R G Trade Tower, Netaji Subhash Palace, Pitampura, New Delhi - 110034 immediately without any delay and shall not retain or misuse the same under any pretext/circumstances.

4) That I have **Received/Not Received** the Diploma certificate for the above-mentioned Class/Grade from **NWAC**
(Score out which is not applicable)

Regional Office, 309,310, 3rd Floor, RG Trade Tower, Netaji Subhash Place, Pitampura, New Delhi - 110034.

5) That this affidavit is required to be produced before the concerned School/College for getting Duplicate Copy of my all education documents **including/excluding** diploma certificate.
(Score out whichever is not applicable)

DEPONENT

VERIFICATION:

Verified at _____ on this _____ day of _____, 2017 that the contents of this
(Place where this affidavit is signed) (Month)

affidavit is true and correct to the best of my knowledge and belief and nothing material has been concealed there from.

DEPONENT