

ANNEXURE-D

AFFIDAVIT (BY IP - ONLY IN CASE OF A FEMALE CANDIDATE)

1. That deponent is an employee with the factory/establishment viz. _____ covered under ESI Act vide Code No. _____ . The deponent is a beneficiary under ESI Act, having Insurance No. _____
2. The deponent has got Daughter (Name : _____) is _____ years of age.
3. The Daughter (Name: _____) of the deponent is unmarried and wholly 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 are found to be incorrect and contrary to the records, the admission sought shall be declared to be illegal and liable to be cancelled.
5. The deponent further declares that if the information submitted by the deponent is found to be incorrect the deponent would be liable to be prosecuted and face the consequential action which the ESI Corporation may deem fit and proper.

DEPONENT

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.

Verified at _____ on this _____ day of _____ month of _____ Year

DEPONENT

AFFIDAVIT (BY FEMALE CANDIDATE ONLY)

1. That deponent Ms. _____ aged ____ years, is the daughter of, Shri/Smt _____
2. Shri/Smt. _____ is employed with the factory / establishment, viz _____ covered under ESI Act vide Code No. _____
3. The father/mother of the deponent is beneficiary under the ESI Act having Insurance No. _____
4. The deponent is unmarried and wholly dependent on the earnings of the Insured Person.
5. The deponent hereby declares that aforesaid facts are correct on the basis of the record and if the aforesaid declaration are found to be incorrect and contrary to the records, the admission sought shall be declared to be illegal and liable to be cancelled.
6. The deponent further declares that if the information submitted by the deponent is found to be incorrect the deponent would be liable to be prosecuted in accordance with law.

DEPONENT

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.

Verified at _____ on this _____ day of _____ month of _____ Year

DEPONENT