

No:- DSO/Sch/2023-24/759

Dated: 11-07-2023

**AFFIDAVIT**  
**(Duly Attested by Notary Public/Oath Commissioner)**

I, \_\_\_\_\_ S/O/D/O \_\_\_\_\_ admitted in  
Course \_\_\_\_\_ Branch \_\_\_\_\_  
Roll No. \_\_\_\_\_ Semester \_\_\_\_\_  
Resident of \_\_\_\_\_ do hereby solemnly  
affirm and declare as under:-

1. That I am a student of above branch in the JC Bose University of Science & Technology Faridabad.
2. That annual income of my all family members is Rs.....per annum.
3. (a) That I will deposit the fee amount of soft loan i.e. providing to me of the Odd Semester 3<sup>rd</sup>/5<sup>th</sup>/7<sup>th</sup> 2023 (please tick whichever is applicable) into YMCA MOB Bank Account within one year of completion of my course or within 03 months of getting the job.( whichever is earlier).

Account name: YMCA MOB Alumni Association, HDFC BANK, Branch Address: 5-R/2 Badshah Khan Chowk, NIT Faridabad, IFSC- HDFC0000093, A/C NO. – 50200035091584

**OR**

(b) That I will deposit the fee amount of soft loan i.e. providing to me of the Odd Semester 3<sup>rd</sup>/5<sup>th</sup>/7<sup>th</sup> 2023 (please tick whichever is applicable) into J.C. Bose University Bank Account within one year of completion of my course or within 03 months of getting the job (whichever is earlier).

Account Name: Registrar J.C. Bose UST, YMCA, Faridabad, Indian Overseas Bank, Branch J.C. Bose UST Campus, Sector- 6 Faridabad IFSC Code. IOBA0001466, Account No. 146601000016122.

4. That my Aadhar No. is.....Contact No.....and my Permanent Address is.....

5. That I will provide my updated Contact No. & Correspondence Address to the O/O Dean Student Welfare, J. C. Bose University of Science and Technology YMCA Faridabad (in case of change the same).
6. That I will provide the information by submitting my Offer Letter to the University and YMCA MOB when I will get the job.
7. That in case I am failed to deposit the fee amount of soft loan within one year of completing the course or within three months of getting the job, the University/ YMCA MOB Alumni Association will be at liberty to take any appropriate legal action against me.

**DEPONENT**

**VERIFICATION:**

It is verified that the above statement is true and correct to the best of my knowledge and belief. Verified at on \_\_\_\_\_

**DEPONENT**

Signature of Parents: \_\_\_\_\_

Name \_\_\_\_\_

Contact No \_\_\_\_\_

Aadhar No \_\_\_\_\_

**WITNESS:** 1.....(Signature)

(Fellow course/ classmate)

Name: \_\_\_\_\_

Roll No. \_\_\_\_\_

Aadhar Card No \_\_\_\_\_

Full Address: \_\_\_\_\_

Contact No. \_\_\_\_\_