

# Third Party Verification Declaration

Date: \_\_\_\_\_

To Whom It May Concern,

I, \_\_\_\_\_, holding the designation of \_\_\_\_\_ at \_\_\_\_\_, hereby declare that I have independently verified the following details regarding:

## Subject Information

Name of Subject \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_  
Other Relevant Details \_\_\_\_\_

## Verification Details

The following information/document(s) have been reviewed for the purpose of this verification:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

I confirm that to the best of my knowledge and belief, the above information is accurate, correct, and verified independently as on the date of this declaration.

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Designation: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date: \_\_\_\_\_

## Important Notes

- This declaration must be completed and signed by an authorized third party (e.g., employer, institution official, verifier).
- Ensure that all supporting evidence or documents are attached or provided for review.
- Any incorrect or misleading information may result in the rejection of the verification.
- This document is intended solely for verification purposes and should not be construed as a legal certification.
- Contact details of the verifier are required for authenticity verification if needed.