

Sworn Statement (Affidavit)

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Head
Department of Anatomy
Faculty of Medicine
Uva Wellassa University

Dear Sir/ Madam,

Donation of Dead Bodies to the Faculty of Medicine, Uva Wellassa University

I/We hereby sign and declare my/our willingness without objection, to donate the dead body of.....(Name of deceased) of N.I.C No..... previously residing at address who expired on (Date), to the Department of Anatomy at the Faculty of Medicine, Uva Wellassa, University- Furthermore, I/we wish to handover the legal ownership of the above mentioned dead body to(position) with NIC No.....

In addition, I/We hereby state that there will be no further inquiry or requests regarding the above-mentioned dead body after donation has taken place.

Name	Age (should be more than 21 years)	Relationship	N.I.C Number	Signature

I hereby declare that this statement has been read and explained to the above-mentioned person/ persons who have in complete understanding affixed their signature(s) in my presence on the Date :

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Signature of the Justice of Peace