

## CANDIDATE IDENTITY VERIFICATION DECLARATION

Date: [Insert Date]

To: [Company/Organization Name]

Department: [Department Name]

Address: [Company Address]

### **Subject: Declaration of Identity Verification**

I, [Full Legal Name], holder of [ID Type: e.g., Passport/National ID Card] number [ID Number], hereby declare and confirm that:

- The personal identification documents provided for this application are authentic, valid, and belong to me.
- All information provided in my curriculum vitae (CV), application forms, and supporting documents is true and accurate to the best of my knowledge.
- I am the individual participating in all stages of the recruitment process, including assessments and interviews.
- I understand that any falsification of identity or documents may lead to the immediate disqualification of my application or termination of employment if already hired.

### **Candidate Details:**

Full Name: [Full Legal Name]

Date of Birth: [Date of Birth]

Permanent Address: [Full Residential Address]

Contact Number: [Phone Number]

Email Address: [Email Address]

### **Signature:**

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[Candidate Full Name]