

KHYBER MEDICAL UNIVERSITY
PESHAWAR

To

Controller of Examinations
Khyber Medical University
Peshawar

Subject: **CHANGE/CORRECTION/ADDITION/DELETION IN NAME/FATHER'S NAME**

Sir,

A. I want to get my name/father's name changed/corrected/added/deleted and as such I request that the same may kindly be sanctioned. A sum of Rs. _____/- has been remitted vide Bank/University Receipt No. _____/ Bank Draft No. _____/- Dated _____.

1. Correction/change/deletion in name wanted from _____
to _____
2. Correction/change/deletion in Father's name wanted from _____
to _____
3. KMU Registration Number _____
4. Phone Number _____
5. Roll No.s/Year of all examinations passed from the Board/University.
 - 1) **SSC** Roll No _____ Year _____
 - 2) **HSSC** Roll No _____ Year _____
 - 3) **MBBS/BDS**
 - I. Roll No _____ Year _____
 - II. Roll No _____ Year _____
 - III. Roll No _____ Year _____
 - IV. Roll No _____ Year _____
 - V. Roll No _____ Year _____

Signature of applicant

Address: _____

B. Forwarded and recommended for the above correction.

Signature and official seal of HoD/Principal of Institute/College

C. Affidavit as per below sample.

I hereby solemnly affirm that I have changed/corrected/added/deleted my/my father's name

From _____ To _____

Signature of applicant _____

1. Signature and address of witness No.1 _____

2. Signature and address of witness No.1 _____

Signature of 1st Class Magistrate/Oath Commissioner _____

(Official seal of the attesting authority to be affixed seal must be legible)