

**VERIFICATION OF DOMICILE OF FATA CANDIDATES BY POLITICAL AGENT/ COMMISSIONER
OF THE RESPECTIVE MERGED AREA DISTRICT**

Certify that Mr./Ms. _____ S/D/O _____ belongs to
recognized tribe of _____ section _____ and his/her father is a
permanent bonafide resident of the tribal area of _____ Agency, sub-
section _____ village _____ and he/she is an eligible
candidate to avail himself/herself of the MBBS/BDS seat reserved in the Medical/Dental Colleges of Khyer
Pakhtunkhwa for FATA candidate. The domicile Certificate wherein category _____ has been issued to the
above named applicant vide No _____ dated _____ by this office and is hereby verified.

Sign & Stamp of PA/ Commissioner