KHYBER MEDICAL UNIVERSITY, PESHAWAR.

Signature Identification of Candidates

______________________________ Examination ______________ Date ____________

Subject/Paper ____

Centre ______________________________ Centre No. ______________

Note: In case this sheet proves insufficient, blank paper should be used for additional names

Roll No.	Script No.	Signature of Candidates	Roll No.	Script No.	Signature of Candidates

CamScanner

Roll No.	Script No.	Signature of Candidates

Roll No.	Script No.	Signature of Candidates

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