



OFFICE OF THE CONTROLLER OF EXAMINATIONS
BACHA KHAN UNIVERSITY, CHARSADDA

**PROFORMA FOR RECOMMENDATION OF SUPERVISORY STAFF FOR B.A./B.Sc & M.A./M.Sc
ANNUAL / SUPPLEMENTARY / SEMESTER EXAMINATION**

APPLIED FOR: SUPERINTENDENT DEPUTY SUPERINTENDENT ASSISTANT SUPERINTENDENT INSPECTOR

S.No.	Name & NIC No.	Qualification & Designation	Institution	Contact Number	Examination Conduction Experience	Examination for which the Candidate is recommended for duty

UNDERTAKING:

1. I will be available for duty at my Institution/Residence. In case of any change, Bacha Khan University, Charsadda will be informed well before the commencement of Examination accordingly.
2. I will perform my Examination duty to the best of my capabilities with honesty, devotion, observing the Rules & Regulations of the Bacha Khan University, Charsadda and maintaining the sanctity of Examination.
3. I have never been disqualified/debarred from University/Board's duties/assignments throughout my professional career.
4. None of my near relatives (wife, husband, son, daughter, adopted son / daughter, grandson / daughter, full & half-brother / sister, niece / nephew brother & sister in law, son & daughter in law, paternal & maternal uncle & aunt and their children etc.) is /are appearing in this examination"

Dated: _____

Applicant Signature

RECOMMENDATION BY HEAD OF THE INSTITUTION:

I solemnly declare that the above particulars of the applicant are true and correct to the best of my knowledge and I further certify that the nominee is a dutiful, honest, trustworthy and hard working person. Furthermore, the applicant has never been disqualified/debarred from University duties/assignments throughout his/her professional career. I further certify that he/she will be relieved from his/her duties to join the assignment given by the Office of Controller of Examinations Bacha Khan University, Charsadda for the Entire period/Specified day(s) of the mentioned Examination.

Signature & Seal of the Recommending Authority