

CERTIFICATE OF DEPARTMENTAL PERMISSION

(TO BE COMPLETED BY THE CANDIDATE)

1. Name _____
2. Father's Name _____
3. CNIC: _____
4. Date of 1st entry into Govt; Service on _____ AS _____ BPS _____
In the Department/ office of _____
5. Current Post held with BPS _____
6. Name of Office / Department _____
7. Post applied for _____
8. Commission's Advertisement No. _____

Date: _____ Signature of the Candidate _____

(TO BE COMPLETED BY THE DEPARTMENT/ OFFICE)

9. The candidate is permitted to apply for the said post.
 - (a) He/ She is presently employed in this Department/Office
as _____ BPS _____ since _____
 - (b) He/ She hold the current post by _____
(Initial appointment/promotion/joined through proper channel).
 - (c) He/ she holds this post in _____
(Permanent/ Temporary/ Contract)
 - (d) District of Domicile as per official record _____
 - (e) Whether the Department is Federal or Provincial other than Khyber
Pakhtunkhwa _____
 - (f) Status of department _____
(Government/ Semi-Government/ Autonomous/Corporation)

Official Stamp

Date: _____

**Signature of
Competent Authority/
Authorize Officer**

To

The Secretary,
Khyber Pakhtunkhwa Public Service Commission,
Peshawar.