



CLAIM FORM for Provisional Merit List of BS PUBLIC HEALTH  
PROGRAM SESSION 2022-23

Provisional Merit No.														
Name of candidate														
Father's Name														
CNIC or B-Form No. (candidate)						-							-	

NATURE OF CLAIM / OBJECTION			
S. #	TYPE OF CLAIM / OBJECTION	DISPLAY	CLAIM
01	Matric/ O-Level Passing Year		
02	Matric / O-Level Obtained Marks		
03	Matric / O-Level <b>10%</b>		
04	Inter / A-Level Passing Year		
05	Inter / A-Level Obtained Marks		
06	<b>Chemistry</b> Theory/Practical <b>(for those who have passed in year 2021)</b>		
07	<b>Physics</b> Theory/Practical <b>(for those who have passed in year 2021)</b>		
08	<b>Biology</b> Theory/Practical <b>(for those who have passed in year 2021)</b>		
09	<b>Inter / A-Level 40%</b>		