ANNEXURE - VII

CERTIFICATE IN SUPPORT OF NON-LOCAL STATUS

(STUDENT RESIDENCE PROOF)

(A)Certificate to be furnished when the candidate has resided in the state for a period of 10 years.

			ental courses) through NEET f		
			(District) of Andhr		
eriod of 10 ye	ears from the year _	to	excluding the periods of st	udy outside the state	
etailed as fol	lows:-				
	D in a	Village	Mandal	District	
Sl.No.	Period	Village	- Indias		
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Place:					
			Signature of	the Competent	
Date:			Authority from Revenue Dept. (Not below the rank of Tahsildar / MRO)		
Office Seal:					

ANNEXURE - VIII

CERTIFICATE IN SUPPORT OF NON-LOCAL STATUS

(PARENT RESIDENCE PROOF)

This is to certify that	Sri/Smt.				Father / Mother
					candidate seeking
mission into professi	onal courses (Medi	cal, Dental courses) t	hrough	NEET for the acad	emic year 2025-26, is
resident of(Place) in				(District) of Andhra Pradesh fo	
total period of 10 years from the year					
total period of 10 year	is iroin the year				
itside the State.					
Sl.No. Peri	od	Village		Mandal	District
1.					100
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Place:					
Date:				Signature of the Competent	
Office Seal:				Authority from Revenue Dept.	
				ot below the rank of Tahsildar / MRO)	

ANNEXURE - IX

CERTIFICATE IN SUPPORT OF NON-LOCAL STATUS

(PARENT CURRENT EMPLOYMENT PROOF IN ANDHRA PRADESH)

(C) Certificate to be furnished when the parent / spouse is an employee of the State of Central Government or Quasi-Government Organization and presently working within State of AP.

This is to certify that Sri/Smt	Father / Mothe	Father / Mother of	
	, a candidate see	king	
admission in to professional courses (Medical, Dental courses)	through NEET for the academic year 2025	-26,	
is presently employed in Andhra Pradesh State in the Organiza	ation fromtill to d	late.	
The Organization is a State / Central / Quasi Government Organ	nization in the State of Andhra Pradesh.		
Place:			
Date:	Signature of the Competent		
Office Seal:	Competent Authority. (Employer)		