

INSTITUTE OF MANAGEMENT SCIENCES PESHAWAR

FINANCIAL AID / SCHOLARSHIP APPLICATION FORM

MBA (3.5) - SESSION 2016-2020



PAK - USAID Fully Funded Need Based Merit Scholarships for MBA (3.5 Years)

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The scholarship covers full tuition fee and monthly stipend (accommodation, books, travelling and incidentals) of the said scholarship holders. These scholarship programs are targeted towards MBA (3.5 Years).

This year the Institute of Management Sciences has been awarded a total of 4 scholarships (3 for Female and 1 for male) under the said Program. Students from marginalized and less developed areas such as Karak, Swabi, Charsadda, districts in Peshawar outskirts, D.I. Khan, Lakki Marwat, FATA Agencies and Frontier Regions, Malakand Division, Gilgit & Baltistan and the whole country at large, are encouraged to apply.

Please Note:

- ✓ Hard copy of financial aid / scholarship application form along with all supported documents should be submitted at Grants Office IMSciences.
- ✓ It is mandatory for all applicants to also apply through **Online Application Form** <http://eportal.hec.gov.pk/hec-portal-web/portal/index.jsf>
- ✓ Grants Office will start accepting / collecting of completed Scholarship Application forms on **07th Nov, 2016 onwards** from those candidates who pass admission entry test on 06th November, 2016 and eligible for admission interview.
- ✓ Last date of Scholarship Forms (both hard and online) is **18th November, 2016**.
- ✓ No Forms will be accepted after the display of admission merit.
- ✓ Incomplete application forms will not be entertained.

Institute of Management Sciences Peshawar

PAK USAID FULLY FUNDED NEED BASED SCHOLARSHIPS

MBA (3.5 Years) Session 2016

Instructions for Applying (Read Carefully)

- ✓ These scholarships are only for the Pakistani nationals.
- ✓ The 50% of the allocated slots are reserved for females specially for those coming from remote and vulnerable areas of Pakistan
- ✓ Award of Scholarships will be decided on the NEED cum MERIT basis.
- ✓ This application form is provided to each and every candidate with the admission prospectus.
- ✓ Applicants, who do not secure admission, will not be entertained.
- ✓ Hard copy of financial aid / scholarship application form along with all supported documents should be submitted at Grants Office IMSciences.
- ✓ It is mandatory for all applicants to also apply through **Online Application Form <http://eportal.hec.gov.pk/hec-portal-web/portal/index.jsf>**
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- ✓ Last date of Scholarship Forms (both hard and online) is **18th November, 2016**.
- ✓ No Forms will be accepted after the display of admission merit.
- ✓ Incomplete application forms will not be entertained.
- ✓ In case of providing false information or concealment of any relevant fact regarding financial status, in any point of time from application date till graduation, his/her scholarship will be immediately deferred and he/she will be terminated from the program.

Required Supporting Documents:

Please Attached attested photo copies of the following applicable documents

1. Domicile of Applicant
2. CNIC / Form B of the Applicant
3. CNIC of the Applicant's Father /Guardian
4. Income Certificate of the Father /Guardian of the applicant
 - i. Salary Slips if the father/Guardian is a salaried person
 - ii. Income Certificate from Secretary Union Council in case Father/Guardian is self employed. It should include the business nature, Name and location of business, Landline phone number, owner NIC and contact details. This document should be on stamp paper.
 - iii. In case of FATA the Income Certificate should be taken from the office of PA / APA or Tehsildar of the concerned Agency or FR.
 - iv. Pension Copy if Father/Guardian is retired.
5. Utility Bills (Electricity, Gas, Telephone, Water) of last six months.
 - I. In case of FATA, the applicant has to submit an affidavit from Tehsildar Office of the concerned Agency / FR that in the area where applicant is residing, there are no utility bills.
 - II. In Case of Chitral, for Utility Bills, submit a certificate of electricity expenses from their local electricity concern person.
6. If the Medical expenses exceeds Rs. 2000 then attached Medical Bills.
7. Fee receipts of the studying brothers/sisters.
8. Death Certificate from Competent Authority (Medical Doctor, Employer, Secretary Union Council, Tehsildar or Political Agent). 9. Rent agreement, if house is rented.

FAMILY UTILITY BILLS, FOOD AND MISCELLENEOUS EXPENSES (Per Month)

<i>Electricity</i>	Telephone	Gas	Water	Food / Kitchen Expenses	Medical Expenses	Miscellaneous Expenses	Educational Expenses	Total

FAMILY EDUCATIONAL EXPENSES (Per Month)

Relationship With Student	Name of The Institute / College	Tuition Fee	Hostel Charges	Books Charges	Travelling Charges	Total
Self						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Brother / Sister						
Total						

GAP / DIFFERENCE IN TOTAL MONTHLY INCOME AND TOTAL MONTHLY EXPENSES (Per Month)

Total Monthly Income	Total Monthly Expenses	Gap / Difference

ASSETS

Accommodation Type (Own / Rented)	Accommodation Size in Marlas / Kanals	Accommodation Address	Value of Home	Status of Construction	Agricultural Land Address and Size	Value of Agricultural Land	Vehicle Type	Bank Balance	Total
				Pakka					
				Semi Pakka					
				Kachha					

ADVANCE LOAN / ANY OTHER SOURCE

Advance Loan*	Other Source Other than This Scholarship	Total

- Please mention that from whom you have taken the loan. Name, NIC Copy and Contact Number of the person (Legal proof, if any)



[Pak USAID Merit and Needs based Scholarship Program]

Scholarship is based on assessment of need and merit as well as availability of funds. Selection will be decided on the basis of information provided in this form and investigations for the authentication of provided information. Candidate may be required to appear for interview(s).

INSTRUCTIONS FOR FILLING OUT THE SCHOLARSHIP APPLICATION FORM:

- ✓ Fill in the form using black ball point pen and write in capital letters and leave space between words
- ✓ Read the application form carefully
- ✓ Complete the photocopy form and make sure everything is correct and final
- ✓ Copy all information from photocopied form to the original form
- ✓ Submit duly completed application form to the Financial Aid Office along with supporting documents
- ✓ Furnish factual, comprehensive and authentic information in the form
- ✓ Current Semester: Check your application for spellings, grammatical errors and factual oversight
- ✓ Keep a photocopy of the filled-in original application form for your record
- ✓ Ensure that you have attached all the required documents by putting a tick mark in checklist
- ✓ Answer all questions. Those not applicable should be marked "N/A"
- ✓ Affidavit Needs to be submitted after final selection of the candidate. For family financial reporting parents/guardian may be consulted for guidance
- ✓ Whenever in doubt or lost, seek help from the Financial Aid Office

Definitions:

Family: Father, mother(s), brother(s), sisters(s), Grandparents etc.

Pucca House: A pucca house is one, which has walls and roof made of the following material.

Wall material: Burnt bricks, stones (packed with lime or cement), cement concrete, timber, ekra etc

Roof Material: Tiles, GCI (Galvanised Corrugated Iron) sheets, asbestos cement sheet, RBC,(Reinforced Brick Concrete), RCC (Reinforced Cement Concrete) and timber etc.

Kutch House: The walls and/or roof of which are made of material other than those mentioned above, such as un-burnt bricks, bamboos, mud, grass, reeds, thatch, loosely packed stones, etc. are treated as kutch house.

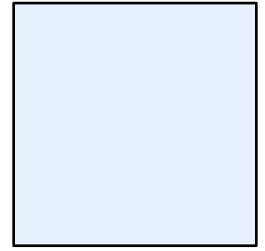
Semi -Pucca house: A house that has fixed walls made up of pucca material but roof is made up of the material other than those used for pucca house.

Dependent Family Member: A family member is dependent if, he/she depends upon applicant father/guardian to meet his/her basic needs (food, clothing and shelter)

Do	Donot
<ul style="list-style-type: none"> ✓ Send your application by post or submit by hand to the Grants office or focal person. ✓ Place documents in right .Put all amounts in Pak Rs. ✓ Do consult with parent(s)/guardian(s) for financial data accuracy & reliability ✓ For the information not present/relevant write in capital letters N/A 	<ul style="list-style-type: none"> ✓ Provide False/vague/ incomplete information. ✓ Please don't overwrite/ scratch on the form. ✓ Please do not send scholarship application directly to HEC or USAID

Pak USAID Merit and Needs based Scholarship Form

MBA (3.5) Session 2016



Affix Passport Size Picture

1. General Information

University Name Degree Graduate Undergraduate

Discipline: Engineering Medical Business Agriculture Veterinary Sciences Social Sciences :

Program Duration: Current Semester

2. Applicant information

Candidate Name Gender Male Female

Father Name University registration No

CNIC Number Marital Status Single Married Divorced

Date of Birth (dd/mm/yyyy) Age

Nationality Domicile
[District Name, Province]

Tehsil Mobile No

Telephone (Area Code-Number) Email

3. Address

Present Address
(Address, City, Country)

Permanent Address

Postal Address

4. Previous Education

Level of Study	Name of the Institution	Type of Institution	Start- End Date	Per Month Fee	Division/ GPA/ Grade
Secondary School Certificate		Public <input type="checkbox"/> Private <input type="checkbox"/>			
Intermediate		Public <input type="checkbox"/> Private <input type="checkbox"/>			
Bachelors		Public <input type="checkbox"/> Private <input type="checkbox"/>			
Masters		Public <input type="checkbox"/> Private <input type="checkbox"/>			

5. Family information

Father Status Alive Deceased Separated (if deceased please share date of demise [Click here to enter a date.](#)) **Professional Status (if alive)** Working Not Working Retired

Father CNIC **Profession** [if working] Public /Government Job Private Sector Job Business Farmer Laborer Other *Detail in case of Other* [Click here to enter text.](#)

Father/Guardian Employer Name [If working, Name of Company / Employer, in case of Retd Please share last organization] **Address of Employer** [Address, City, Country,]

Father/Guardian Designation [Please do mentioned the Grade in Case of Public Sector Organization, in case of Retd Please share last designation] **Mobile Number** [Area Code-Number]

Father/Guardian NTN Number and Tax paid [Please attached the Latest tax return.] **Telephone** [Area Code-Number]

Mother Status Alive Deceased Separated (if deceased please share date of demise [Click here to enter a date.](#)) **Mother Status:** Working Not Working

Mother's Marriage Relationship Combined Separated **Mother Profession** [if working] House wife Private Sector Job Business Farmer Laborer Tailoring Not applicable Other *Detail in case of Other* [Click here to enter text.](#)

6. Family Members

Total Family Members

Dependent
Family Members

Total Earning
Member(s)

Family Member
Studying

No of Brother(s)

No of Sister(s)

7. Family Income (Add extra sheet if required)

Name of earning person	Profession	Financially supporting the family	Relationship with Applicant	Gross Income
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Relationship.	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Relationship.	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Relationship.	
Total				

Please attached the Latest Salary Slip with application Form

8. Current Educational Expenditure

Name	Relationship with Applicant	Institution Name	Class	Per Month Education Expenditure
	Relationship.			
	Relationship.			
	Relationship.			
	Relationship.			
	Relationship.			
Total				

Name	Per Month Education Expenditure
Self(Please include expenditure including tuition fee and lodging charges)	

9. Monthly Family Expenditure

Detail	Per Month Amount
Average <u>Telephone bill</u> of last Six months (Please attached Bills with application form]	Click here to enter text.
Average <u>Electricity Bills</u> of last Six months (Please attached Bills with application form]	
Average <u>Gas Bills</u> of last Six months (Please attached Bills with application form]	
Average <u>Water Bills</u> of last Six months (Please attached Bills with application form]	
Average Monthly <u>Mobile</u> Bill	
Average Family Educational Expenditure other than applicant (Please Ref S no 8 previous page]	
Applicant Educational Expenditure (Please Ref S. no 8 previous page]	
Average Family Expenditure on Kitchen	
Average Family Medical Expenditure (Please attached Bills with application form]	
Accommodation Expenditure , in case of rent (Please attached rent agreement]	
Average Family Misc. Expenditure	
Total Monthly Expenditure	

Detail	Per Month Amount
Net Income(Total Monthly Income – Total Monthly Expenditure) [Ref point 7 and above block]	

10.If the monthly Income is negative kindly explain the reasons for the gap, and the arrangements through which the differential gap is met by the family

11.Accommodation

Type	Bungalow <input type="checkbox"/> Apartment Flat <input type="checkbox"/> Village House <input type="checkbox"/> Town House <input type="checkbox"/>	Structure of House	Pucca <input type="checkbox"/> Semi Pucca <input type="checkbox"/> Kutcha <input type="checkbox"/>
Status	Self Owned <input type="checkbox"/> Family Owned <input type="checkbox"/> Rented <input type="checkbox"/> Employer Owned <input type="checkbox"/>	No of Rooms	1-2 <input type="checkbox"/> 2-4 <input type="checkbox"/> 4-6 <input type="checkbox"/> 6-8 <input type="checkbox"/> Above 8 <input type="checkbox"/>

Size of Home [inSq. Ft]	Covered Areas [inSq. Ft]
No of Air Conditioners: 0 <input type="checkbox"/> 1-2 <input type="checkbox"/> 2-4 <input type="checkbox"/> 4-6 <input type="checkbox"/> 6-8 <input type="checkbox"/> Above 8 <input type="checkbox"/>	Number of Servants 0 <input type="checkbox"/> 1-2 <input type="checkbox"/> 2-4 <input type="checkbox"/> Above 4 <input type="checkbox"/>

Monthly Rent [if applicable]	Address
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Any other house/flat owned by the Parents/Guardian (if yes please specify with location and size)

Assets

Does the family own any Transport Yes No , if yes please fill the following

Type of Transport	Engine Capacity CC	Quantity	Current Market Value
Choose an item.			
Choose an item.			
Choose an item.			
Total Value of Transport			

Statement of Purpose (attach separate sheet if required)

Under taking

1. The information given in this application is true to the best of my knowledge and I understand that any incorrect information will result in the cancellation of this application. If any information given in this application is found incorrect or false after grant of financial assistance, the institute will stop further assistance and the student will have to refund all payment received and or penalty equal to total scholarship amount.
2. HEC and University reserves the right to use information given in this form for verification and other purposes

Date	Date
Father/Guardian Signature	Applicant Signature

12. Check List

Documents	attached	Documents	Attached
Copied of CNIC		Copies of last six (06) month utility bills	
Father	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Electricity	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Mother	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Gas	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Guardian	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Telephone	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Income Tax Certificate		Water	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Father	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Attested copy of rent agreement (if applicable)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Mother	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Copies of last & latest fee receipts of self and siblings	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Guardian	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Copies of Medical bills/ expenditure related documents (if applicable)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Copy of last Income Tax Return of		Copies of previous scholarship(s) attained (if applicable)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Father	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Statement of Purpose & passport size Photographs	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Mother	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Salary Certificate of	
Guardian	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Father/ Guardian	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		Mother	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

For Official Use

Application Form Complete with supporting documents	Yes <input type="checkbox"/> No <input type="checkbox"/>	Application Case Review Dates	
The notices furnished to the applicant for furnishing of required documentation			
		Signature of The Focal person Date	

PRESCRIBED INCOME CERTIFICATE FORMATS

All applicants are required to provide Income Certificate signed from Secretary Union Council / PA / APA / Tehsildar in case Father/Guardian is self employed in the following professions. **This income statement document should be on “Stamp Paper” as per the following prescribed formats.**

1. Farmer
2. Driver (Own Vehicle)
3. Driver (Salaried)
4. Shop Keeper (Owner)
5. Shop Keeper (Salaried)
6. Daily Wager

(Note: This document must be prepared on Stamp Paper)
(Own Vehicle)

I Mr. _____ s/o Mr. _____ Father / Guardian of Mr. _____ am a driver by profession. I have vehicle having registration # _____ and with following further details:

Vehicle Type: _____

Vehicle Company: _____

Vehicle Model: _____

Vehicle Value: _____

Engine Capacity: _____

I use the route / area _____ for driving my vehicle and this certificate is signed by the president of drivers union (if any). Total income of my family from this source is Pak Rs. _____ / month and Pak Rs. _____ / year. I have attached registration copy and pictures of my vehicle with this certificate.

Furthermore, I reconfirm on oath that above information are correct and has been provided with the best of my knowledge. If found any concealment of information in the above statements: any legal action may be taken against me / scholarship applicant, under the rules.

Vehicle Owner:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Vehicle Driver:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

President Driver Union:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Forwarded for final approval and recommendation:
Political Tehsildar / Secretary Union Council of respective region

Required Documents:

1. Registration Documents
2. Driving License
3. Pictures of Vehicle
4. CNICs of Signatories

(Note: This document must be prepared on Stamp Paper)
Income Certificate for Driver
(Salaried Driver)

I Mr. _____ s/o Mr. _____ Father / Guardian of Mr. _____ am a driver by profession. I am driving a vehicle on salary having vehicle registration # _____. This vehicle belongs to Mr. _____ s/o Mr. _____ bearing CNIC # _____. Further details of the vehicle are as follows.

Vehicle Type: _____

Vehicle Company: _____

Vehicle Model: _____

Vehicle Value: _____

Engine Capacity: _____

I use route / area _____ for driving my vehicle and this certificate is signed by the president of drivers union (if any). Total income of my family from this source is Pak Rs. _____ / month and Pak Rs. _____ / year. I have attached registration copy and pictures of my vehicle with this certificate.

Furthermore, I reconfirm on oath that above information are correct and has been provided with the best of my knowledge. If found any concealment of information in the above statements: any legal action may be taken against me / scholarship applicant, under the rules.

Vehicle Owner:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Vehicle Driver:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

President Driver Union:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Forwarded for final approval and recommendation:
Political Tehsildar / Secretary Union Council of respective region.

Required Documents:

1. Registration Documents
2. Driving License
3. Pictures of Vehicle
4. CNICs of Signatories

(Note: This document must be prepared on Stamp Paper)

Income Certificate for Farmer

I Mr. _____ s/o Mr. _____ Father / Guardian of Mr. _____ am a **farmer** by profession. I have _____ (size) land for cultivation which is located in area of _____.

I cultivate _____ crops / seeds on my land which earn Pak Rs. _____ / per month and Pak Rs. _____ / per year. I have attached pictures of the land and the verification / registration from the Patwari office or other concerned land authorities.

Furthermore, I reconfirm on oath that above information are correct and has been provided with the best of my knowledge. If found concealment of information in the above statements: any legal action may be taken against me / scholarship applicant, under the rules.

Parent / Land Owner:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Witness / Malak:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Witness / Malak:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Forwarded for final approval and recommendation:
Political Tehsildar / Secretary Union Council of respective region

Required Documents:

1. Verification from the Patwari / Land Authorities
2. Pictures of land
3. CNIC of signatories

(Note: This document must be prepared on Stamp Paper)
Income Certificate for Shopkeeper (Owner)

I Mr. _____ s/o Mr. _____ is Father / Guardian of Mr. _____ am a **Shopkeeper** by profession as per the following details.

Shop Name: _____

Shop Size: _____

Business Nature: _____

Shop Value: _____

Shop Address: _____

Our shop deals in _____ kinds of materials on resale / wholesale level which earns Pak Rs. _____ / per month and Pak Rs. _____ / per year. I have attached pictures and letter heads of the shop.

Furthermore, I reconfirm on oath that above information are correct and has been provided with the best of my knowledge. If found any concealment of information in the above statements: any legal action may be taken against me / scholarship applicant, under the rules.

Parent / Shopkeeper:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Witness / Malak:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Witness / Malak:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Forwarded for final approval and recommendation:
Political Tehsildar / Secretary Union Council of respective region

Required Documents:

1. Pictures of shop
2. Letter head of shop
3. CNICs of Signatories

(Note: This document must be prepared on Stamp Paper)
Income Certificate for Shopkeeper (Salaried)

I Mr. _____ s/o Mr. _____ is Father / Guardian of Mr. _____ am a **Shopkeeper** by profession and working for the employer as per the following details. My monthly salary from this profession is Rs. _____ / per month and Pak Rs. _____ / per year.

Shop Name: _____

Shop Size: _____

Business Nature: _____

Shop Value: _____

Shop Address: _____

This shop deals in _____ kinds of material on resale / wholesale level which earns Pak Rs. _____ / per month and Pak Rs. _____ / per year. I have attached pictures and letter heads of the shop.

Furthermore, I reconfirm on oath that above information are correct and has been provided with the best of my knowledge. If found any concealment of information in the above statements: any legal action may be taken against me / scholarship applicant, under the rules.

Parent / Shopkeeper:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Witness / Malak:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Witness / Malak:

Name: _____

CNIC #: _____

Signature: _____

Mobile #: _____

Forwarded for final approval and recommendation:

Political Tehsildar / Secretary Union Council of respective region

Required Documents:

1. Pictures of shop
2. Letter head of shop
3. CNICs of Signatories

(Note: This document must be prepared on Stamp Paper)

Income Certificate for Daily Wager

I Mr. _____ s/o Mr. _____ Father / Guardian of Mr. _____ am a **Daily Wager** by profession. I work as _____ in/with _____ located at _____ . I earn Pak Rs. _____ / per month and Pak Rs. _____ / per year from all income sources.

Furthermore, I reconfirm on oath that above information are correct and has been provided with the best of my knowledge. If found any other source of income or concealment of information in the above statements: any legal action may be taken against me / scholarship applicant.

I hereby say on oath that I have no source of income other than above mentioned income which is further verified by the following concerned authorities.

Parent / Guardian

Name: _____

CNIC #: _____

Signature: _____

1. Witness / Malik

Name: _____

CNIC #: _____

Signature: _____

2. Witness / Malik

Name: _____

CNIC #: _____

Signature: _____

Forwarded for final approval and recommendation:

Political Tehsildar / Secretary Union Council of respective region

Required Documents:

1. CNIC Copy of Parent / Guardian
2. CNIC Copy Scholarship Applicant
3. Any Relevant Picture