### SCHOLARSHIP APPLICATION FORM

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).

#### PROVIDING FALSE INFORMATION

### Providing false information may result in one or all of the following:

- Cancellation of admission.
- Rustication from the university.
- Initiation of criminal proceedings.
- Disqualification for award of any future loan/scholarship.
- Refund of all the payment received and or a penalty equal to total scholarship amount.

#### INSTRUCTIONS FOR FILLING OUT THE SCHOLARSHIP APPLICATION FORM:

- ✓ Fill in the form using black ball point pen and write in capital letters ✓ Read the application form carefully.
- ✓ Make a photocopy of the application form
- ✓ 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 admission office or focal person
- ✓ Furnish factual, comprehensive and authentic information in the form
- ✓ For family financial reporting parents/guardian may be consulted for guidance
- ✓ Whenever in doubt or lost, seek help from the Focal Person
- ✓ 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

# **Application Form Check List**

SN D	Description	Tick the relevant
1	Copies of computerized NIC of	Totovani
	Father	
	Mother	
	Guardian	
2	Salary Certificate of	
2	Father	
	Mother	Ħ
	Guardian	一
3	Copies of last six (06) month utility bills	
	Electricity	
	Gas	
	Telephone	
	Water	
4	Attested copy of rent agreement (if applicable)	
5	Copies of last & latest fee receipts of self and siblings *	
6	Copies of Medical bills/ expenditure related documents (if applicable)	
7	Copies of pervious scholarship(s) attained (if applicable)	Ħ
8	Statement of Purpose	
*Tick	the Section When Completed	
I	Section A: Personal and family information	
II	Section B: Cumulative information of Self, Parents & Guardian Assets	
III	Section C: Financial arrangements for current year	
IV	Section D: Educational Record	
DO's:	<ul> <li>Send your application by post or submit by hand to the student financial aid office or office or focal person.</li> <li>Place documents in right order as per above sections (1 to 10) □ Put all amounts</li> <li>Do consult with parent(s)/guardian(s) for financial data accuracy &amp; reliability</li> <li>For the information not present/relevant write in capital letters N/A</li> </ul>	

# DO NOT:

- Provide False/vague/ incomplete information.
- Overwrite/ scratch on the form. Send scholarship application form directly to HEC



BS:			Faculty: _			Campus:	
1	. Applicant's	Name:			_Gender:	Male Female	e
2	. Applicant CN	NIC No.		-			-
3	. Marital Stat	us Sing	le	Married	Divorce	ed	
4	. Date of Birt	h:	Age :	Domic	ile		
	. Present Add						
6	Permanent A	Address:					<u> </u>
7	. Tel (Res.): _		Mobile:	En	nail:		
8	. Educational	Record					
Lev	el of Study*	Name	and Location of	Institute	Year of Passing	Marks Obtained/ Total	Divisi
BS	(Semester-I)						
I	ntermediate						
	Secondary						
	* Please atta	ach attested cop	pies of result card	l or certificate			
9	. Are you cur	rently earning	through some job	e: Yes	No		
1	0. If Yes, Desi	gnation:	Name	of Employer /C	Company: _		
1	1. Total Montl	nly Applicant G	Fross Income in F	Pak Rs			
1	2. Total Famil	y Members cur	rently living with	ı you			
\$#	Name of Far	mily Member (s	s) Relationship	Marital Sta	atus E	Earning Hand (YE	S/NO)
1							
2							
3							
4							
5							
6							
1	2 Details of E	amila Mamban	a Famina (Tales				
S	Family	Relationship	S Earning (Take 6) Family Member	Organization	Designat	ion Monthly	
#	Member Name		occupation (Specify)	Name		Gross Pay/Earning	Remarks
2							
3							
4							
4	Total Monthly	Family Income	e (add self incom	ne, if applicable	e) Pak Rupe	ees	
1	5 Brothers/Sig	sters/Children/I	Family Members	etudvina		<u> </u>	



S #	Name	Relation applies		Name & Add	ress of In	stitute	Fee pe	r month
1								
2								
3								
4								
5								
6								
15A	Total Fees & T Charges	Cuition	<u> </u>					
16	. Father's Nam	1e <b>:</b>		Computeri	zed N.I.C	. No		
17	. Status: Alive	e		Deceased				
18	. Professional s	tatus: En	nployed	Retired	Busi	ness Owner		
	. Name of Com							
20	. Tel (Off):			N	Iobile:			
21	. Occupation Ty	ype:		NT	N			
22. Designation & Grade ( BPS/ SPS/PTC etc): Gross Monthly Income:								
22	. Designation &	c Grade (	BPS/ SPS/F	PTC etc):	Gros	ss Monthly I	ncome:	
23	. Total Net Mor	nthly Take	e Home Inco	ome (Salary/ Pe	ension/ Ot	thers):		
23 24	. Total Net Mor .Any Other Sup	nthly Take	e Home Inco Person (Mot	ome (Salary/ Pe her/ Guardian/	ension/ Ot Brother/ S	thers): Sister/Family	Relative/C	Guardian):
23 24 25	. Total Net Mor .Any Other Sup . Name:	nthly Take	e Home Inco Person (Mot	ome (Salary/ Pe her/ Guardian/	ension/ Ot Brother/ S	thers):	Relative/C	Guardian):
23 24 25 26	. Total Net Mor .Any Other Sur . Name: Occupation an	nthly Take oporting F	e Home Inco Person (Mot ation	ome (Salary/ Pe her/ Guardian/ 	ension/ Ot Brother/ S Relationsh	hers): Sister/Family iip:	Relative/C	Guardian):
23 24 25 26 27	. Total Net Mor .Any Other Sup . Name: Occupation an	nthly Take oporting F nd Design ncial Supp	e Home Inco Person (Mot ation port Availab	ome (Salary/ Pe her/ Guardian/ 	ension/ Ot Brother/ S Relationsh	hers): Sister/Family iip:	Relative/C	Guardian):
23 24 25 26 27	. Total Net Mor .Any Other Sur . Name: Occupation an	oporting F oporting F and Design ncial Supp	e Home Inco Person (Mot ation port Availab	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Ot Brother/ S Relationsh	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28	. Total Net Mor .Any Other Sup . Name: . Occupation an . Monthly Finan . Asset Income	oporting Pand Designated Supporting Source	e Home Inco Person (Mot ation port Availab thly basis)	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28 S #	. Total Net Mor .Any Other Sup . Name: . Occupation an . Monthly Finan . Asset Income	oporting Pand Designated Supporting Source	e Home Inco Person (Mot ation port Availab thly basis)	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28 S #	. Total Net Mor .Any Other Sup . Name: . Occupation an . Monthly Finan . Asset Income Suppose	oporting Formation of Designation of	e Home Inco Person (Mot ation port Availab thly basis)	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28 S # 1	. Total Net Mor .Any Other Sup . Name: Occupation an . Monthly Finan . Asset Income Income Suppose Property Ren Land Lease	porting Formation of Designation of Designation of Source of total states.	e Home Inco Person (Mot ation port Availab thly basis)	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28 S # 1 2	. Total Net Mor . Any Other Sup . Name: . Occupation an . Monthly Finan . Asset Income Income S Property Ren Land Lease Bank Deposit	porting F  and Design  ncial Supple (on mone  Source  tt	e Home Inco Person (Mot ation port Availab thly basis)	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28 <b>S</b> # 1 2 3 4	. Total Net Mor . Any Other Sur . Name: . Occupation and . Monthly Finan . Asset Income Income Property Ren Land Lease Bank Deposit Shares / Secu	porting F  and Design  ncial Supple (on mone  Source  tt	e Home Inco Person (Mot ation port Availab thly basis)	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
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23 24 25 26 27 28 S # 1 2 3 4 5	. Total Net Mor .Any Other Sup . Name: Occupation an . Monthly Finan . Asset Income Income S Property Ren Land Lease Bank Deposit Shares / Secu Other (Specif	porting Formation of Designation of Designation of Source of the state	e Home Inco Person (Mot ation port Availab thly basis) Fathe	ome (Salary/ Peher/ Guardian/  I  ble to Applicant	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Relative/C	Guardian):
23 24 25 26 27 28 S # 1 2 3 4 5	. Total Net Mor . Any Other Sur . Name: . Occupation and . Monthly Finan . Asset Income Income Property Ren Land Lease Bank Deposit Shares / Secu	nthly Take poporting P  nd Design ncial Supp e (on mon Source t  ts*  urities* fy)	e Home Inco Person (Mot ation port Availab thly basis) Fathe	her/ Guardian/  her/ Guardian/  ble to Applicant  r Mother	ension/ Of Brother/ S Relationsh in Pak R	hers): Sister/Family tip: s	Other	Total
23 24 25 26 27 28 S # 1 2 3 4 5	. Total Net Mor . Any Other Sur . Name: . Occupation an . Monthly Finar . Asset Income Income Property Ren Land Lease Bank Deposit Shares / Secu Other (Specif Total	nthly Take poporting P  nd Design ncial Supp e (on mon Source t  ts*  urities* fy)	e Home Inco Person (Mot ation port Availab thly basis) Fathe	her/ Guardian/  her/ Guardian/  ble to Applicant  r Mother	Ension/ Ot Brother/ S Relationsh in Pak R Spouse	Sister/Family sip: Self	Other	Total  Monthly Net
23 24 25 26 27 28 S # 1 2 3 4 5	. Total Net Mor . Any Other Sur . Name: . Occupation an . Monthly Finar . Asset Income Income Property Ren Land Lease Bank Deposit Shares / Secu Other (Specif Total	nthly Take poporting P  nd Design ncial Supp e (on mon Source t  ts*  urities* fy)	e Home Inco Person (Mot ation port Availab thly basis) Fathe	her/ Guardian/  ble to Applicant  Mother  Monthly	Ension/ Ot Brother/ S Relationsh in Pak R Spouse	Sister/Family hip: Sister/Family hip: Self Monthly Green	Other	Guardian):

S #	Family Member Name	Relationship	Monthly Income	Monthly Gross	Monthly Net
			from Assets	Pay/Earning	(Take home)
					Pay/Earning
1					
2					
3					
4					
_					



Musli	m Hands			
5	Applicant Monthly Gross	Pay/Earning		
6	Applicant Monthly Net (T	ake home) Pay		
29-A	Total Monthly Income	e in Pak Rupees		
29-B	Total Annual Income	in Pak Rupees		

## 30.FAMILY EXPENDITURES

30A. Accommodation	Expenditure
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Type:	Bungalow	Apartment /Flat		Town House	Village	
House						
<b>Status:</b>	Rented	Self or Family owned		Employer / Govt C	Owned	
Rent Pa	yment: Self	Employer/Govt			Others	
House P	lot Size in Sq. ft	Cover	ed A	Area in Sq. ft		_

S#	Accommodation		Number of	Accommodation	Accommodation
	Location /Address	Bedrooms	AC's	Monthly Rent	Annual Rent
		1-2	1-2		
		1-4	1-4		
		4-6	4-6		
		> 6	> 6		
30B	Total Accommodati	on Rental Exper	nditure		

Any other house/flat owned by the Parents/Guardian (if yes please specify with location and

## 31. Utilities Expenditures

Last Month Utilities Paid									
Telephone	Electricity	Gas	Water						

32. Family Medical Expenditures: Average of last six months (Per Month Expenditure)

## 33. Total Family Expenditures

	Education	Accommodation	Utilities	Medical	Misc.	Total Monthly	Total Annual
S #	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure
33							

S #	Description	Amounts in Pak Rupees
(Sec.29A)	Total Monthly Income	
(Sec. 33)	Total Monthly Expenditure	
34 (29.A – 33A)	Net Monthly Disposable Income*	
S #	Description	Amounts in Pak Rupees
(Sec.29B)	Total Annual Income	



	(Sec. 33)	7	Fotal Annu	ıal E	xpendit	ure					
	35 (29.B – 33	3.B)	Net Annua	1 Dis	posable	Income*					
	e monthly / Annual Dingements through which	-		_		• •		reas	ons for th	ie ga	p, and the
Asse	ets (with current mar	ket valu	e)								
	66. Does the family ow		,	Yes		No					
	If yes kindly fill	•	•								
S #	Transport Type	÷	Mak /Mod		Engin	e Capacity (C	C) 1	Regis	tration No.		Ownership Period
1	(Car/ Motor cycle/ O	thers*)									
2										+	
* O	thers: include tractor, 167. Number of Cattle(s		•	mote	orcycle	rickshaw, c	arriag	e pic	k, truck e	etc.	
3	8. Area and location o	of Land(s	)/Plot(s) o	wne	d			C	ltivable	A ~	wigultural
	Assets Title	Qty	Size		Locat	tion (Addre	ess)		Area		ricultural Tield per Acre
Res	idential										
Con	nmercial										
Agr	icultural										
Em	oloyer/Govt Scheme										
	9. Assets worth (Curro			1		C	C.	.16	C 19	!	Takal
S#			Father	IVI	other	Spouse	Se	eli	Guardi	an	Total
1	House										
2	Business										
3	Land & Building										
4	Bank Balance										
5	Stocks/Prize bond										
6	Others/ Cattle(s)										
40.											
* Fa	HI. Loan taken for Apmily/ Friend Loan cify details of loan tak				h the re	lative / frier	nd)				
	2. Any source of finar	ncing oth	er than loa	ın (P	lease sp	ecify)					

43. How were the admission /first semester charges paid?



Date

Department Name

	4. Per month fee/ tuitio	_		·	
	5. Have you ever got a				
(If ye	Name of Institute	olarships & attach Scholarship Name	Total Scholarship Amount	of of the scholars  Total  Scholarship  Period	ships) Class / Level at which Scholarship was granted
1					
2	1				
	ment of Purpose (Exp				
UND	ERTAKING				
	he information given in				
	nat any incorrect info				
•	nformation given in this		V		
	ne institute will stop fur			have to refund al	l payment received
ai	nd or penalty equal to t	otal scholarship ar			
	IEC reserves the right t			for varification c	ind other nurnoses
2. <i>H</i>		o use information g			
2. <i>H</i>	icant Signature:	ů .			
2. H Appli					
2. H Appli Paren For C	icant Signature:	÷	Date		

Signature Head of Department / Focal Person