

## **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                               | Description                                                            | Tick the relevant        |
|----------------------------------|------------------------------------------------------------------------|--------------------------|
| 1                                | Copies of computerized NIC of                                          |                          |
|                                  | Father                                                                 | <input type="checkbox"/> |
|                                  | Mother                                                                 | <input type="checkbox"/> |
|                                  | Guardian                                                               | <input type="checkbox"/> |
| 2                                | Salary Certificate of                                                  |                          |
|                                  | Father                                                                 | <input type="checkbox"/> |
|                                  | Mother                                                                 | <input type="checkbox"/> |
|                                  | Guardian                                                               | <input type="checkbox"/> |
| 3                                | Copies of last six (06) month utility bills                            |                          |
|                                  | Electricity                                                            | <input type="checkbox"/> |
|                                  | Gas                                                                    | <input type="checkbox"/> |
|                                  | Telephone                                                              | <input type="checkbox"/> |
|                                  | Water                                                                  | <input type="checkbox"/> |
| 4                                | Attested copy of rent agreement (if applicable)                        | <input type="checkbox"/> |
| 5                                | Copies of last & latest fee receipts of self and siblings *            | <input type="checkbox"/> |
| 6                                | Copies of Medical bills/ expenditure related documents (if applicable) | <input type="checkbox"/> |
| 7                                | Copies of pervious scholarship(s) attained (if applicable)             | <input type="checkbox"/> |
| 8                                | Statement of Purpose                                                   | <input type="checkbox"/> |
| *Tick the Section When Completed |                                                                        |                          |
| I                                | Section A: Personal and family information                             | <input type="checkbox"/> |
| II                               | Section B: Cumulative information of Self, Parents & Guardian Assets   | <input type="checkbox"/> |
| III                              | Section C: Financial arrangements for current year                     | <input type="checkbox"/> |
| IV                               | Section D: Educational Record                                          | <input type="checkbox"/> |

### **DO's:**

- Send your application by post or submit by hand to the student financial aid office or admission office or focal person.
- Place documents in right order as per above sections (1 to 10)
- 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**

### **DO NOT:**

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



Name of the University: \_\_\_\_\_

Degree Title / Program: \_\_\_\_\_

1. **Applicant's Name:** \_\_\_\_\_ Gender: Male ☐ Female ☐

2. Applicant NADRA \_\_\_\_\_  
NIC No. \_\_\_\_\_

3. Marital Status Single ☐ Married ☐ Divorced ☐

4. Age : \_\_\_\_\_ Domicile \_\_\_\_\_

5. Present Address \_\_\_\_\_

6. Permanent Address: \_\_\_\_\_

7. Are you currently working : Yes ☐ No ☐

8. If answer is Yes to Section No. 8 complete the sections (9-13)

Designation: \_\_\_\_\_ Name of Employer /Company: \_\_\_\_\_

9. Total Monthly Applicant Gross Income in Pak Rs. \_\_\_\_\_

10. Total Monthly Applicant Take Home Income\* in Pak Rs. \_\_\_\_\_

\* Take Home Income: Salary / Pay available after deduction of taxes, provident fund charges etc.

11. Tel (Res.): \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

12. Total Family Members currently living with you: \_\_\_\_\_

| S # | Name of Family Member (s) | Relationship | Marital Status | Remarks** |
|-----|---------------------------|--------------|----------------|-----------|
| 1   |                           |              |                |           |
| 2   |                           |              |                |           |
| 3   |                           |              |                |           |
| 4   |                           |              |                |           |
| 5   |                           |              |                |           |
| 6   |                           |              |                |           |

13. Details of Family Members Earning (Take extra sheet if required):

| S # | Family Member Name                                                      | Relationship | Family Member occupation (Specify) | Organization Name | Designation | Monthly Gross Pay/Earning | Remarks |
|-----|-------------------------------------------------------------------------|--------------|------------------------------------|-------------------|-------------|---------------------------|---------|
| 1   |                                                                         |              |                                    |                   |             |                           |         |
| 2   |                                                                         |              |                                    |                   |             |                           |         |
| 3   |                                                                         |              |                                    |                   |             |                           |         |
| 4   |                                                                         |              |                                    |                   |             |                           |         |
| 14  | Total Monthly Family Income (add self income, if applicable) Pak Rupees |              |                                    |                   |             |                           |         |



15. Brothers/Sisters/Children/Family Members studying \_\_\_\_\_

| S #        | Name                         | Relation with applicant | Name & Address of Institute | Fee per month |
|------------|------------------------------|-------------------------|-----------------------------|---------------|
| 1          |                              |                         |                             |               |
| 2          |                              |                         |                             |               |
| 3          |                              |                         |                             |               |
| 4          |                              |                         |                             |               |
| 5          |                              |                         |                             |               |
| 6          |                              |                         |                             |               |
| <b>15A</b> | Total Fees & Tuition Charges |                         |                             |               |

**16. Father's Name:** \_\_\_\_\_ Computerized N.I.C. No \_\_\_\_\_

17. Status: Alive ☐ Deceased ☐

18. Professional status: Employed ☐ Retired ☐ Business Owner ☐

19. Name of Company/Employer: \_\_\_\_\_

20. Tel (Off): \_\_\_\_\_ Mobile: \_\_\_\_\_

21. Occupation Type: \_\_\_\_\_ NTN \_\_\_\_\_

22. Designation & Grade ( BPS/ SPS/PTC etc): \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

23. Total Net Monthly Take Home Income (Salary/ Pension/ Others): \_\_\_\_\_

**24. Any Other Supporting Person (Mother/ Guardian/ Brother/ Sister/Family Relative/Guardian):**

25. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

26. Occupation and Designation \_\_\_\_\_

27. Monthly Financial Support Available to Applicant in Pak Rs. \_\_\_\_\_

**28. Asset Income** (on monthly basis)

| S #        | Income Source        | Father | Mother | Spouse | Self | Other | Total |
|------------|----------------------|--------|--------|--------|------|-------|-------|
| 1          | Property Rent        |        |        |        |      |       |       |
| 2          | Land Lease           |        |        |        |      |       |       |
| 3          | Bank Deposits*       |        |        |        |      |       |       |
| 4          | Shares / Securities* |        |        |        |      |       |       |
| 5          | Other (Specify)      |        |        |        |      |       |       |
| <b>28A</b> | Total                |        |        |        |      |       |       |



### 29. Total Family Monthly Income

| S #  | Family Member Name                    | Relationship | Monthly Income from Assets | Monthly Gross Pay/Earning | Monthly Net (Take home) Pay/Earning |
|------|---------------------------------------|--------------|----------------------------|---------------------------|-------------------------------------|
| 1    |                                       |              |                            |                           |                                     |
| 2    |                                       |              |                            |                           |                                     |
| 3    |                                       |              |                            |                           |                                     |
| 4    |                                       |              |                            |                           |                                     |
| 5    | Applicant Monthly Gross Pay/Earning   |              |                            |                           |                                     |
| 6    | Applicant Monthly Net (Take home) Pay |              |                            |                           |                                     |
| 29-A | Total Monthly Income in Pak Rupees    |              |                            |                           |                                     |
| 29-B | Total Annual Income in Pak Rupees     |              |                            |                           |                                     |

### 30.FAMILY EXPENDITURES

#### 30A. Accommodation Expenditures

**Type:** Bungalow ☐ Apartment /Flat ☐ Town House ☐ Village House ☐  
**Status:** Rented ☐ Self or Family owned ☐ Employer / Govt Owned ☐  
**Rent Payment:** Self ☐ Employer/Govt ☐ Others ☐  
 House Plot Size in Sq. ft. \_\_\_\_\_ Covered Area in Sq. ft. \_\_\_\_\_

| S # | Accommodation Location /Address        | Number Of Bed Rooms |                          | Number Of Air conditioners |                          | Accommodation Monthly Rent | Accommodation Annual Rent |
|-----|----------------------------------------|---------------------|--------------------------|----------------------------|--------------------------|----------------------------|---------------------------|
|     |                                        | 1-2                 | <input type="checkbox"/> | 1-2                        | <input type="checkbox"/> |                            |                           |
|     |                                        | 2-4                 | <input type="checkbox"/> | 2-4                        | <input type="checkbox"/> |                            |                           |
|     |                                        | 4-6                 | <input type="checkbox"/> | 4-6                        | <input type="checkbox"/> |                            |                           |
|     |                                        | Above 6             | <input type="checkbox"/> | Above 6                    | <input type="checkbox"/> |                            |                           |
| 30B | Total Accommodation Rental Expenditure |                     |                          |                            |                          |                            |                           |

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

### 31. Utilities Expenditures

| Last Month Utilities Paid |             |     |       |
|---------------------------|-------------|-----|-------|
| Telephone                 | Electricity | Gas | Water |
|                           |             |     |       |

### 32. Medical Expenditures: Average of last six months (Per Month Expenditure)\_\_\_\_\_

#### Total Family Expenditures

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

| S #                              | Description                    | Amounts in Pak Rupees |
|----------------------------------|--------------------------------|-----------------------|
| (Sec.29A)                        | Total Monthly Income           |                       |
| (Sec. 33)                        | Total Monthly Expenditure      |                       |
| <b>34</b><br><b>(29.A – 33A)</b> | Net Monthly Disposable Income* |                       |

| S #                               | Description                   | Amounts in Pak Rupees |
|-----------------------------------|-------------------------------|-----------------------|
| (Sec.29B)                         | Total Annual Income           |                       |
| (Sec. 33)                         | Total Annual Expenditure      |                       |
| <b>35</b><br><b>(29.B – 33.B)</b> | Net Annual Disposable Income* |                       |

\* If the monthly / Annual Disposable Income is negative, kindly explain the reasons for the gap, and the arrangements through which the differential gap is met by the family

#### Assets (with current market value)

36. Does the family own any Transport? Yes ☐ No ☐

If yes kindly fill the relevant details

| S # | Transport Type<br>(Car/ Motor cycle/ Others*) | Make<br>/Model | Engine Capacity (CC) | Registration No. | Ownership<br>Period |
|-----|-----------------------------------------------|----------------|----------------------|------------------|---------------------|
| 1   |                                               |                |                      |                  |                     |
| 2   |                                               |                |                      |                  |                     |

\* Others: include tractor, rickshaw, bi-cycle, motorcycle rickshaw, carriage pick, truck etc.



37. Number of Cattle(s) (with kind) \_\_\_\_\_

38. Area and location of Land(s)/Plot(s) owned \_\_\_\_\_

| Assets Title         | Qty | Size | Location (Address) | Cultivable Area | Agricultural Yield per Acre |
|----------------------|-----|------|--------------------|-----------------|-----------------------------|
| Residential          |     |      |                    |                 |                             |
| Commercial           |     |      |                    |                 |                             |
| Agricultural         |     |      |                    |                 |                             |
| Employer/Govt Scheme |     |      |                    |                 |                             |

39. Assets worth (Current Market Value in Pak. Rs.)

| S # | Assets Title      | Father | Mother | Spouse | Self | Guardian | Total |
|-----|-------------------|--------|--------|--------|------|----------|-------|
| 1   | House             |        |        |        |      |          |       |
| 2   | Business          |        |        |        |      |          |       |
| 3   | Land & Building   |        |        |        |      |          |       |
| 4   | Bank Balance      |        |        |        |      |          |       |
| 5   | Stocks/Prize bond |        |        |        |      |          |       |
| 6   | Others/ Cattle(s) |        |        |        |      |          |       |
| 40. | Total             |        |        |        |      |          |       |

#### 41. Loan taken for Applicant Education

\* Family/ Friend Loan

(Specify details of loan taken and relationship with the relative / friend)

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42. Any source of financing other than loan (Please specify) \_\_\_\_\_

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

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#### 44. Applicants educational record:

| Level of Study | Name and Location of Institute | Per Month Fee | To- From month/ yr. | Division/ GPA/ | %age / CGPA |
|----------------|--------------------------------|---------------|---------------------|----------------|-------------|
| Bachelors      |                                |               |                     |                |             |
| Intermediate   |                                |               |                     |                |             |
| Secondary      |                                |               |                     |                |             |



45. Per month fee/ tuition charges of the institution last attended \_\_\_\_\_

46. Have you ever got any other Scholarships: Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes fill the details of scholarships & attach documentary proof of the scholarships)

| S # | Name of Institute | Scholarship Name | Total Scholarship Amount | Total Scholarship Period | Class / Level at which Scholarship was granted |
|-----|-------------------|------------------|--------------------------|--------------------------|------------------------------------------------|
| 1   |                   |                  |                          |                          |                                                |
| 2   |                   |                  |                          |                          |                                                |

**Statement of Purpose** (Explain your suitability for this scholarship) - attach separate sheet if required

### UNDERTAKING

1. The information given in this application are 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 reserves the right to use information given in this form for verification and other purposes.

Date: Parents / Guardian Signature \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

### For Official use only

Are the applicant documents in order? ☐ Yes ☐ No

Application Case Review Dates (i) \_\_\_\_\_ (ii) \_\_\_\_\_

Additional Remarks

Date \_\_\_\_\_ Department Name \_\_\_\_\_ Signature Head of Department / Focal Person \_\_\_\_\_