

Nar	ne of the Univ	ersity:					
Deg	ree Title / Pro	gram:		C.NO	Departr	nent	
App	olicant's Name	:		Gender: Ma	ale Fema	ale 🔲	
	<ol> <li>Applicant NIC No.</li> </ol>		-		-		Two Attested
	2. Marital Sta	tus Singl	le Marı	ried D	Divorced		
	3. Age :	Domic	eile				Photographs
	4. Present Ado	dress					
	5. Permanent						
	6. Are you cu	rrently working	: Yes	No			
	7. If answer is	Yes to Section	No. 8 complete	the sections (9-	13)		
	Designatio	n:	Name	e of Employer /	Company:		
	8. Total Mont	hly Applicant G	ross Income in F	Pak Rs			
	9. Total Mont	hly Applicant T	ake Home Incom	ne* in Pak Rs			
	* Take Ho	me Income: Sal	ary / Pay available a	fter deduction of t	axes, provident f	und charges etc.	
	10. Tel (Res.):		Mobile:	Em	ail:		
			rently living with				
S #	Name of Far	mily Member (s	) Relationship	Marital Stat	tus 1	Remarks**	
1							
2							
3							
4							
5							
6							
	13. Details of F	Family Members	 s Earning <i>(Take e</i>	 extra sheet if red	auired):		
			Family Member			Monthly	
S	Family	Relationship	occupation	Organization	Designation	Gross	Remarks
#	Member Name		(Specify)	Name		Pay/Earning	
1							
2							
3							
4							
14	Total Monthly	Family Income	e (add self incom	e, if applicable)	Pak Rupees		



6

15A

Education Commission		

Total Fees & Tuition Charges

15	15. Brothers/Sisters/Children/Family Members studying					
S #	Name	Relation with applicant	Name & Address of Institute	Fee per month		
1						
2						
3						
4						
5						

16. Father's Name: Comput	terized N.I.C. No
17. Status: Alive Deceased Deceased	
8. 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/ Guardia	an/ Brother/ Sister/Family Relative/Guardian):
25. Name:	Relationship:
26. Occupation and Designation	
27. Monthly Financial Support Available to Applic	ant 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)						
28A	Total						



29. Total Family Monthly Income

4	9. Total Family Month	ny income								
			Monthly Incom	me Monthly Gross	Monthly Net					
S #	Family Member Name	Relationship	from Assets	Pay/Earning	(Take home)					
					Pay/Earning					
1										
2										
3										
4										
5	Applicant Monthly Gro	ss Pay/Earning								
6	Applicant Monthly Net	(Take home) Pay								
29-A	Total Monthly Incom	ne in Pak Rupee	es							
29-B	Total Annual Incom	e in Pak Rupees								
30	O.FAMILY EXPENDI	TURES								
30	OA. Accommodation E	Expenditures								
	Type: Bungalow	☐ Apa	artment /Flat	Town House	☐ Village House ☐					
	Status: Rented	Self	or Family owned	Employ	yer / Govt Owned					
	Rent Payment: S	=	Employer/Gov		Others					
	House Plot Size i			vered Area in Sq. ft						
		1	Number Of	1 1						
S #	Accommodation	Number Of	Air	Accommodation	Accommodation					
S #	Location /Address	Bed Rooms		Monthly Rent	Annual Rent					
			conditioners							
		1-2	1-2							
		2-4	2-4							
		4-6	4-6							
		Above 6	Above 6							
30B	Total Accommodation R	Lental Expenditur	e   L							
				on (if was places spee	ify with leastion					
	Any other house.	tiat Owned ha tr	ie Parentezi ziiarai	Any other house/flat owned by the Parents/Guardian (if yes please specify with location						

and size)\_\_\_\_\_



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## 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**

	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)	Total Annual Expenditure	
35 (29.B – 33.B)	Net Annual Disposable Income*	

If the monthly / Annual Disposable Income is negative, kindly explain the reasons for the gap, are	ıd
ne arrangements through which the differential gap is met by the family	
ssets (with current market value)	_
36. Does the family own any Transport? Yes No	
If yes kindly fill the relevant details	

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

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

Higher
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Commission

	. Number o			,								_
38. Area and location of Assets Title			Qty Size					ress)	Cultivable Area		Agricultural Yield per Acre	
Resid	ential											
Commercial												
Agric	ultural											
Emple	oyer/Govt S	Scheme										
39	. Assets wo	rth (Curro	ent Mark	et Value ir	ı Pa	k. Rs.)			<u> </u>			
S #	S # Assets Title			Father		Mother Spouse			Self Guard			Total
1	House											
2	Business											
3	Land & Building											
4	Bank Bala	ance										
5	Stocks/Pri	ize bond										
6	Others/ Ca	attle(s)										
40.	Total											
* Family/ Friend Loan (Specify details of loan taken and relationship with the relative / friend)												
42. Any source of financing other than loan (Please specify)												
44. Applicants educational record:												
Level of Study Nai			me and Location of Institute				Month Fee	To- Fi		Divisi GPA		%age / CGPA
Bac	chelors		Anstit	utt						<b>GI</b> F	-1	COIA
Inter	mediate											
Sec	ondary											



45. Per month fee/ tuition charges of the institution last attended										
46	6. Have you ever got a	ny other Scholars	ships: Yes	_ No	_					
(If ye	es fill the details of scho	olarships & attach	documentary pro	of of the scholars	ships)					
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										
UND	ERTAKING									
		s application are true	to the best of my k	nowledge and I und	lerstand that any incorrect					
	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									
inc	incorrect or false after grant of financial assistance, the institute will stop further assistance and the student will have to									
ref	refund all payment received and or penalty equal to total scholarship amount.									
2. HI	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	Dej	partment Name	Signat	ure Head of Depa	artment / Focal Person					