



## USAID Funded 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:

1. Fill in the form using black ball point pen and write in capital letters and leave space between words
2. Read the application form carefully
3. Before filling the original form make photocopy and fill it first
4. Submit duly completed application form to the Financial Aid Office along with supporting documents
5. Furnish factual, comprehensive and authentic information in the form
6. Whenever in doubt or lost, seek help from the Financial Aid Office
7. Check your application for spellings, grammatical errors and factual oversight
8. Keep a photocopy of the filled-in original application form for your record
9. Ensure that you have attached all the required documents by putting a tick mark in checklist
10. Answer all questions. Those not applicable should be marked "N/A"
11. Affidavit Needs to be submitted after final selection of the candidate. For family financial reporting parents/guardian may be consulted for guidance

### 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.

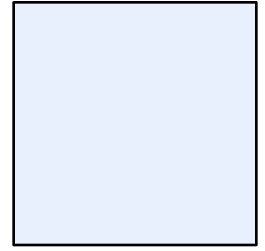
**Kutchra House:** The walls and/or roof of which are made of material other than those mentioned above, such as un-burnt bricks, bamboos, mud, grass, reeds, thatch, loosely packed stones, etc. are treated as kutchra house.

**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
<ol style="list-style-type: none"> <li>1. Send your application by post or submit by hand to the admission office or focal person.</li> <li>2. Place documents in right .Put all amounts in Pak Rs.</li> <li>3. Do consult with parent(s)/guardian(s) for financial data accuracy &amp; reliability</li> <li>4. For the information not present/relevant write in capital letters N/A</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide False/vague/ incomplete information.</li> <li>2. Please don't overwrite/ scratch on the form.</li> <li>3. Please do not send scholarship application directly to HEC or USAID</li> </ol>

# USAID Funded Merit and Needs based Scholarship Form



Affix Passport Size Picture

## 1. General Information

University Name Degree Graduate  Undergraduate

Discipline Engineering  Medical  Business  Agriculture  Veterinary Sciences  Social Sciences  :

Sub Discipline

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 Email  
(Area Code-Number)

## 3. Address

Present Address

[H no, St No, Mohallah City,  
Country]

Permanent Address

Postal Address

#### 4. Previous Education of the Applicant

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"/>	From To		
Intermediate		Public <input type="checkbox"/> Private <input type="checkbox"/>	From To		
Bachelors		Public <input type="checkbox"/> Private <input type="checkbox"/>	From To		
Masters		Public <input type="checkbox"/> Private <input type="checkbox"/>	From To		

#### 5. Family information

<b>Father Status</b> [Please attached the death certified in case of applicant Father is expired]	Alive <input type="checkbox"/> Deceased <input type="checkbox"/> Separated <input type="checkbox"/> (if deceased please share date of demise)	<b>Professional Status (if alive)</b>	Earning <input type="checkbox"/> Not Earning <input type="checkbox"/> Retired <input type="checkbox"/>
<b>Father CNIC</b>	<b>Profession</b> [if working]	Public /Government Job <input type="checkbox"/> Private Sector Job <input type="checkbox"/> Business <input type="checkbox"/> Farmer <input type="checkbox"/> Laborer <input type="checkbox"/> Other <input type="checkbox"/> <i>Detail in case of Other</i> <a href="#">Click here to enter text.</a>	
<b>Father/Guardian's Employer Name</b> [If working, Name of Company / Employer, in case of Retd Please share last organization]	<b>Address of Employer</b> [Address, City, Country,]		
<b>Father/Guardian Designation</b>	<b>Mobile Number &amp; Telephone</b> [Area Code-Number]		
<b>Father/Guardian NTN Number and Tax paid</b>	<b>Financial Support other than father</b> Mother(s) <input type="checkbox"/> Brother(s) <input type="checkbox"/> Sister <input type="checkbox"/> Uncle(s) <input type="checkbox"/> Aunt(s) <input type="checkbox"/> Other <input type="checkbox"/> Not Applicable <input type="checkbox"/> Income		
<b>Mother Name</b>	<b>Mother CNIC No:</b> Mother CNIC Expiry date		
<b>Mother Status</b> [Please attached the death certificate]	Alive <input type="checkbox"/> Deceased <input type="checkbox"/> Separated <input type="checkbox"/> (if deceased please share date of demise)	<b>Mother Status:</b>	Earning <input type="checkbox"/> Not Earning <input type="checkbox"/>
<b>Marriage Relationship</b>	Combined <input type="checkbox"/> Separated <input type="checkbox"/>	<b>Mother Profession</b> [if working]	House wife <input type="checkbox"/> Private Sector Job <input type="checkbox"/> Business <input type="checkbox"/> Farmer <input type="checkbox"/> Laborer <input type="checkbox"/> Tailoring <input type="checkbox"/> Not applicable <input type="checkbox"/> Other <input type="checkbox"/> <i>Detail in case of Other</i> <a href="#">Click here to enter text.</a>

## 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.	
<b>Total</b>				

Please attached the Latest Salary Slip \ income certificate with application Form, Please include all income e.g Salary, Pension, Income from Land, mortgage, lease, dividends, shares etc in Gross income. Please attached the Latest Salary Slip \ income certificate with application Form. The profession includes Public /Government Job ,Private Sector Job , Business, Farmer , Laborer, self-employed, Other

## 8. Current Monthly Educational Expenditure

Name	Relationship with Applicant	Institution Name	Class	Per Month Education Expenditure
	Relationship.			
	Relationship.			
	Relationship.			
	Relationship.			
	Relationship.			
<b>Total (Per Month)</b> [Please convert semester, bi annual expenditure into monthly expenditure ]				

Candidate Self-Expenditure on Education (per month educational expenditure)	
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**9. Monthly Family Expenditure**

Detail	Per Month Amount
Average <u>Telephone bill</u> of last Six months (Please attached Bills with application form)	<a href="#">Click here to enter text.</a>
Average <u>Electricity Bills bill</u> of last Six months (Please attached Bills with application form)	
Average <u>Gas Bills bill</u> of last Six months (Please attached Bills with application form)	
Average <u>Water Bills bill</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/Food	
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**

[Click here to enter text.](#)

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## 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 <input type="checkbox"/> 2-3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 6-8 <input type="checkbox"/> Above 8 <input type="checkbox"/>
Size of Home [in Sq. Ft]		Covered Areas [in Sq. Ft]	
No of Air Conditioners: 0 <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> Above 4 <input type="checkbox"/>		Number of Servants	0 <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> Above 4 <input type="checkbox"/>
Monthly Rent [if applicable]		Address	
Any other house/flat owned by the Parents/Guardian (if yes please specify with location and size)			
Click here to enter text.			

## 12. 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			

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

Type of cattle	Quantity	Current Market Value
Total Value of cattle		

Other Assets	Quantity	Current Market Value
Does the family own any <u>Stocks/Prize bond</u> Yes <input type="checkbox"/> No <input type="checkbox"/> <u>(if yes please fill the next columns)</u>		
Does the family own any <u>Bank Balance</u> Yes <input type="checkbox"/> No <input type="checkbox"/> <u>(if yes, please fill and attached the statement)</u>		
Does the family own any <u>Plot</u> Yes <input type="checkbox"/> No <input type="checkbox"/> <u>(if yes fill the next columns)</u>	Size in Sq Ft	
Does the family own any <u>House</u> Yes <input type="checkbox"/> No <input type="checkbox"/> <u>(if yes fill the next columns)</u>	Size in Sq Ft	
Does the family own Yes <input type="checkbox"/> No <input type="checkbox"/> any <u>Agriculture Land</u> (if <u>yes please fill the next column)</u>	Size:	
Any other asset		
Total		

Any other financing other than this scholarship (Please specify)

Click here to enter text.

How were the admission /first semester charges paid?

Have you ever awarded any other scholarship before ,if yes please share the details

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

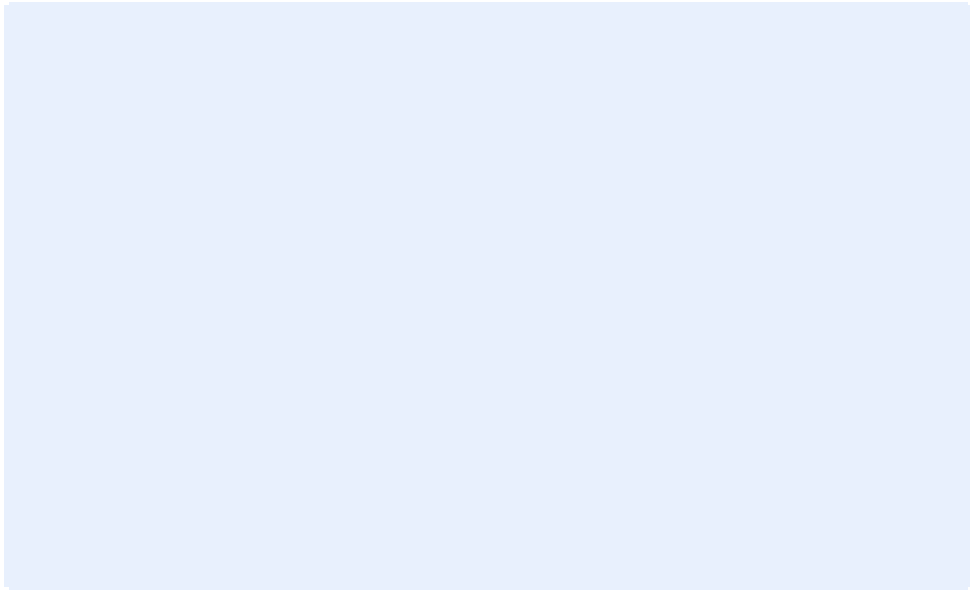
Date

Father/Guardian  
Signature

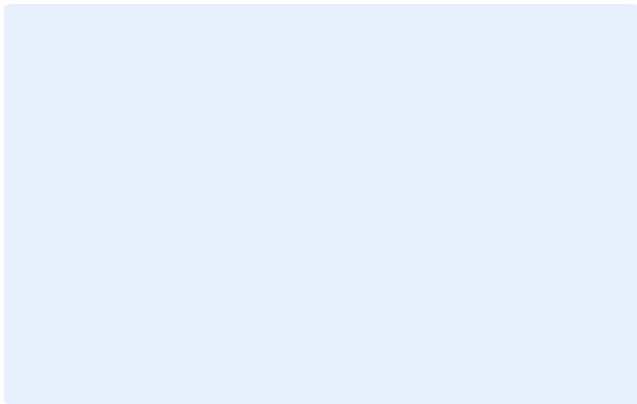
Date

Applicant  
Signature

13. Please attached pictures showing inside and front view of your House (Optional)



Outside view



Inside view



## 14. Check List

Documents	attached	Documents	Attached
Copied of CNIC		<b>Copies of last six (06) month utility bills</b>	
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"/>
<b>Income Tax Certificate</b>		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"/>	<b>Attested copy of rent agreement (if applicable)</b>	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"/>
<b>Copy of last Income Tax Return of</b>		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"/>	<b>Salary Certificate of</b>	
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"/>
<b>Picture of House</b>	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			
		<b>Signature of The Focal person</b>	
		<b>Date</b>	