

### 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 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.

# MUST READ THE FOLLOWING INSTRUCTIONS FOR FILLING OUT THE SCHOLARSHIP APPLICATION FORM: Read the instructions and application form carefully.

- ✓ First make a photocopy of this blank application form.
- ✓ **Do not write anything on the original form** until your duly filled-in photocopied application form is checked by Students Financial Aid Office (SFAO), University of Karachi (UoK).
- ✓ Fill in the photocopy form using black ball point pen and write in **capital letters only.**
- ✓ Answer all questions. Fields should not be left blank. Those not applicable should be clearly marked "N/A"
- ✓ Complete the photocopy form and make sure everything is correct and final.
- ✓ Consult your parents/guardian for family financial reporting e.g. Income, expenditures etc.
- ✓ Furnish factual, comprehensive and authentic information in the form.
- ✓ Bring the complete duly filled-in photocopied application form alonwith all supporting documents to SFAO-UoK for correction of error (s).
- ✓ Once the photocopied application form is checked by SFAO, you will be then asked to copy all information from photocopied form to the original form.
- ✓ Submit the duly filled-in original application form to SFAO-UoK, in person.
- ✓ Ensure that you have attached all the required documents by putting a tick mark in checklist
- ✓ Whenever in doubt or lost, seek help from the SFAO-UoK
- ✓ Affidavit Needs to be submitted after final selection of the candidate

Contact Details							
Name:	Father's Name:						
Applicant's Mob#	Father's Mob #						
Applicant's CNIC#	Father/Guardian CNIC#						
Department:	Class:						
Admission Form #	Seat Number:						
(for new admissions only)	(for already studying students)						

Note: SFAO often contact the applicants for clarification/information. Therefore, applicant is required to write his/her contact numbers instead of other family members.



## The following documents must be attached with the application form **Application Form Check List**

SN	Description	Tick the relevant
1	Copies of computerized NIC of	Totovanie
	Applicant	
	Father	
	Mother	
	Guardian	
2	Copy of Death Certificate of Father/Mother/Guardian (if applicable)	
3	Salary Certificate of	_
	Father	
	Mother (if applicable)	
	Guardian (if applicable)	
4	Copies of last six (06) month utility bills	_
	Electricity	
	Gas	
	Telephone (if applicable)	
	Water	
5	Attested copy of rent agreement (if applicable)	
6	Copies of last & latest fee payment receipts of self and siblings *	
7	Copies of Medical bills/ expenditure related documents (if applicable)	
8	Copies of previous scholarship(s) attained (if applicable)	
9	Statement of Purpose	
10	Postal Self Addressed Envelop of Applicant (Qty-2)	
*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		

- 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



Nar	ne of the Univ	versity:U	niversity of Kar	achi						
Deg	ree Title / Pro	ogram:					·			
Stu	lying in Class	<b>3:</b>	Department:							
	1. Applicant	's Name:			Gend	er: Male	Female			
	2. Applicant	CNIC#		-			-			
	3. Family Nu	mber on CNIC	(Reverse Side):							
	. Marital Status Single Married Divorced Widow									
	5. Age :	. Age : Domicile								
	6. Present Ad	ldress								
	7. Permanent	Address:								
	8. Are you cu	arrently working	g: Yes	No						
	9. If answer i	s Yes to Section	n No. 8 complete	the sections (	9-11)					
	Designation	on:	Nar	ne of Employe	r /Company: _					
	10. Total Mon	thly Applicant (	Gross Income in	Pak Rs.						
	11. Total Mon	thly Applicant	Гаке Home Inco	me* in Pak Rs	•					
	* Take H	ome Income: Sa	ılary / Pay available	after deduction o	f taxes, provident	fund charges e	tc.			
	12. Tel (Res.):		Mobile:	E	mail:					
	13. Total Fami	ily Members cu	rrently living wi	th you:						
S #	Name of Fa	amily Member (	(s) Relationsh	ip Marital S	tatus	Remarks**				
1										
2										
3										
4										
5										
6										
		Family Membe	 rs Earning <i>(Take</i>	extra sheet if	required):					
	Family	I willing ividinoc	Family Member	•	cquireuj.	Monthly	Monthly			
S	Member	Relationship	occupation	Organization	Designation	Gross	Net			
#	Name		(Specify)	Name		Pay/Earning (Before deduction of taxes, rent, etc.)	Pay/Earning (After deduction of taxes, rent, etc.)			
1						,,	, , , , , , , , , , , ,			
2										
3										
4										
15	Total Monthl	y Family Incom	ne (add self inco	me, if applicab	le) PKR					



16	Brothers.	/Sisters	Children	/Family	Members	studvina
10.	Diomers	0181618/	Cillialen	/ганшү	Members	Studville

10	. Diomeis/ Siste	is ciliarella	aiiiiy ivici	iioois staayi	····b			
S #	applicant annual/s mo							
1								<u>,/</u>
2								
3								
4								
5								
6								
16A	Total Fees & T	Cuition Charge	es					
17	. Father's Nan	1e:		_ Computeri	zed N.I.C. N	No		
	Status: Alive							
	Professional sta				etired E	Business O	wner D	aily Wag
	Name of Comp							
	Tel (Off):							
	Occupation Ty							
	. Designation &							
	. Total Net Mor							
	. Any Other Suj	-						
	. Name:  Occupation ar							
	. Monthly Finantial Asset Income							
S #	Income S		Father	Mother	Spouse	Self	Other	Total
1	Property Ren		- 441141	1,1001101	~рошье	~~11	o mei	
2	Land Lease							. <u> </u>
3	Bank Deposit	†s*						
4	Shares / Secu							<u> </u>
5								
	Other (Specif	.y <i>)</i>						
29A	Total							l



## **30. Total Family Monthly Income**

			Monthly Incom	me Monthly Gross	Monthly Net
СЛ	Family Mamban Nama	Dalatianshin			
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			
30-A	Total Monthly Inco	me in Pak Rupe	es		
30-B	Total Annual Incom	e in Pak Rupees	3		
31	I.FAMILY EXPENDI	TURES			
31	A. Accommodation I	Expenditures			
	Type: Bungalow	•	artment /Flat	Town House	☐ Village House ☐
	Status: Rented		or Family owned		yer / Govt Owned
	Rent Payment:	Self 📖	Employer/Gov	t	Others
	House Plot Size	n Sq. ft	Co	vered Area in Sq. ft	
S #	Accommodation Location /Address	Accommodation Number Of		Accommodation  Monthly Rent	Accommodation Annual Rent
		1-2	1-2		
31B	Total Accommodation I	Rental Expenditur	e		
	Any other house	flat owned by th	ne Parents/Guardi	an (if yes please spec	ify with location

and size)\_



## **32.** Utilities Expenditures

Last Month Utilities Paid							
Telephone	Electricity	Gas	Water	Mobile			

## 33. Medical Expenditures: Average of last six months (Per Month Expenditure)

	Total Family Expenditures									
S #	Education Expenditure	Accommodation Expenditure	Utilities Expenditure	Medical Expenditure	Misc. Expenditure (Food + Transportation etc.)	Total Monthly Expenditure	Total Annual Expenditure			
34										

S #	Description	Amount in Pak Rupees
(Sec.30A)	Total Monthly Income	
(Sec. 34)	Total Monthly Expenditure	
35	Net Monthly Disposable Income*	
(30-A-34)	Tree name and a speciment	
S #	Description	Amount in Pak Rupees
S# (Sec.30-B)	Description Total Annual Income	Amount in Pak Rupees
	1	Amount in Pak Rupees
(Sec.30-B)	Total Annual Income	Amount in Pak Rupees

* 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)
37. 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.



38	. Number of Cattle	e(s) (with	kind)								
39	. Area and location	n of Land	(s)/Plot(s) o	wned _							
	Assets Title	Qty	Size		Location (Address)		Cultivable Area		Agricultura Yield per Acre		
Resid	ential										Title
Comn	nercial										
Agric	ultural										
	oyer/Govt Scheme	:									
40	. Assets worth (Cu	rrent Ma	rket Value ii	n Pak.	Rs.)			1			
S #	Assets Tit	le	Father	Mot	her	Spouse	S	elf	Guard	ian	Total
1	House										
2	Business										
3	Land & Building	Ţ,									
4	Bank Balance										
5	Stocks/Prize bon	d									
6	Others/ Cattle(s)										
41.	Total										
43	ily/ Friend Loan fy details of loan t  . Any source of fir  . How were the ad	nancing o	ther than loa	an (Ple	ase sp	ecify)	iend)				
Level	of Study Nelselors	ame and	rd: Location o titute	of		<b>Month</b> Fee	To- F mont		Divisi GPA		%age / CGPA
	mediate										
	ondary										



46	6. Per month fee/ tuition	on charges of the	institution last a	ttended	
4	7. Have you ever got a	ny other Scholar	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					
State	ment of Purpose (Exp	lain your suitabilit	y for this scholar	ship) - attach sep	arate sheet if required
					_
		UNI	<b>DERTAKING</b>		
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. H	EC reserves the right to use	information given in	this form for verifica	tion and other purpo	ses.
Date:					
Parents / Guardian Signature Applicant Signature:					
	Official use only		_	_	
Are the	he applicant documents	in order? LYe	S	No	
Annli	ication Case Review Da	ates (i)	(ji)		
	ication Case Review Da	ites (1)	(II)		<del></del>
Addit	tional Remarks				
Date	Det	partment Name	Signat	ure Head of Den	artment/ Focal Person
Daic	DC	Jaranient Ivanie	Signa	are fread of Dep	aranony i ocal i cison