

Name of the University:					
Degree Title / Program:					
University Regd. No:					
1. Applicant's Name:			Gender:	Male	Female
2. Applicant NADRA	T	-			-
NIC No.					
3. Marital Status Single	e Marrie	ed Di	vorced		
4. Age : Domicil	le				_
5. Present Address					
6. Permanent Address:					
7. Are you currently working	: Yes	No			
8. If answer is Yes to Section No.	o. 8 complete the se	ctions (9-10)			
Designation:	Name	of Employer /C	Company:		
9. Total Monthly Applicant G	ross Income in Pa	k Rs			
10. Total Monthly Applicant T	ake Home Income	e* in Pak Rs			
* Take Home Income: Sala	ary / Pay available afte	r deduction of taxe	s, provident fund	charges etc.	
11. Tel (Res.):	Mobile:	Ema	il:		
12. Total Family Members curr	rently living with	you:			
S # Name of Family Member (s) Relationship	Marital Statu	ıs F	Remarks**	
1	-				
2					
3					
4					
5					
6					
13. Details of Family Members	Earning (Take ex	tra sheet if req	uired):		
S Family	Family Member	Organization		Monthly	
# Member Name Relationship	occupation	Name	Designation	Gross	Remarks
	(Specify)			Pay/Earning	
1					
2					
3					
4					
14 Total Monthly Family Income	(add self income	if applicable)	Pak Runees		



Brothers/Sisters/Children/Family Members studying _

S #	Name	Relation with applicant	Name & Address of Institute	Fee per month
1				
2				
3				
4				
5				
6				
15A	Total Fees & T	Tuition Charges	s	
17. 18.	Status: Alive Professional sta	Dec	Computerized N.I.C. No reased Business Owner :	
20). Tel (Off):		Mobile:	
21	. Occupation Ty	ype:	NTN	
22	2. Designation &	Grade (BPS/	SPS/PTC etc):Gross Monthly Inc	come:
23	B. Total Net Mor	nthly Take Hor	me Income (Salary/ Pension/ Others):	
24	.Any Other Sup	porting Person	(Mother/ Guardian/ Brother/ Sister/Family I	Relative/Guardian):
25	5. Name:		Relationship:	
26	6. Occupation an	d Designation		
27	Monthly Finan	cial Support Av	vailable to Applicant in Pak Rs	

28. Asset Income (on monthly basis)

20.	Asset meome (on month)	y Dasis)					
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

	2. I otal I alliny wioner	ly income			
			Monthly Incom	ne Monthly Gross	Monthly Net
S #	Family Member Name	Relationship	from Assets	Pay/Earning	(Take home)
					Pay/Earning
1					
2					
3					
3					
4					
5	Applicant Monthly Gros	s Pay/Earning			
6	Applicant Monthly Net	Take home) Pay			
29-A	Total Monthly Incom	ne in Pak Rupee	es		
	Total Annual Incom	e in Pak Rupees	8		
30	FAMILY EXPENDI	TURES			
30	A. Accommodation E	xpenditures			
	Type: Bungalow	Apa	rtment /Flat	Town House	Village House
	Status: Rented	Self	or Family owned	Employ	ver / Govt Owned
	Rent Payment: Self		Employer/Govt		Others
					Others
	House Plot Size in	n Sq. ft	Cov	vered Area in Sq. ft	
	Accommodation	Number Of	Number Of	Accommodation	Accommodation
S #			Air		
	Location /Address	Bed Rooms	conditioners	Monthly Rent	Annual Rent
		1-2	1-2		
		2-4	2-4		
		4-6	4-6		
		Above 6	Above 6		
30B	Total Accommodation R	-			
				an (if yes please speci	

and size)_____

31. Utilities Expenditures

	Last Month U	Itilities 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, 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 (Car/ Motor cycle/ Others*)	Make /Model	Engine Capacity (CC)	Registration No.	Ownership Period
1					
2					

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



Higher Education Commission

37. Number of Cattle(s) (with kin	nd)		 	
38. Area and location of Land(s)	'Plot(s) owne	ed	 	

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)						
	Total						

41. Loan taken for Applicant Education

* Family/ Friend Loan (Specify details of loan taken and relationship with the relative / friend)			
42. Any source of financing other than loan (Please specify)_			
43. How were the admission /first semester charges paid?			

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					



Additional Remarks

Date

MESSION					
40	5. Per month fee/ tuition 6. Have you ever got a es fill the details of scho	ny other Scholars	ships: Yes	_ No	_
S#	Name of Institute	Scholarship Name	Total Scholarship Amount	Total Scholarship Period	Class / Level at which Scholarship was granted
1					
2					
	ment of Purpose (Exp	iam your suitaomi	y for this scholars	siiip) - attacii sepa	
in in	ne information given in thi formation will result in the correct or false after grant of fund all payment received a	e cancellation of this of financial assistance,	application. If any i	information given in p further assistance a	this application is found
2. H	EC reserves the right to use	information given in t	his form for verifica	tion and other purpos	ses.
For I	Parents / Guardian Signature Departmental use only ugh Concerned Depar ne applicant documents	(Forward tment)	_	gnature:	

Application Case Review Dates (i) _____(ii) ____

Signature Head of Department / Focal Person

Department Name

For Students use only

1-	Student Email Address:
2-	Student Contact No:
3-	Student CNIC No:
4-	Student HBL Bank Account (if any):

- 5- Dear Student confirms the following Documents needs to be attached with the application form.
 - **a-** In case Father's/Guardian's Govt. Employer or Retired from Govt. Service. Last month pay slip or Pension book copy.
 - b- In case Private Employer/Business Man.
 - Hand written certificate in Rs.50/- or above affidavit duly endorsement by the Chairman of Local Union Council (statement must be hand written that be knows to father/guardian and his income).
 - Applications will be rejected, if submitted a fake affidavit and university may take disciplinary action against candidates, which may result cancelation of admission.
 - **c-** Last month Utility Bills of their permanent address. Electricity, Gas, Telephone, Water etc.
 - d- Death certificate in case of Orphan Student.
- 6- Submitted the application in file cover.