



## APPLICATION FORM – ARTS AND CULTURE SCHOLARSHIP PROGRAM – FY 2020

### Eligibility Criteria for this Program:

- The applicant must be a Pakistani National
- Students must secure admission in the approved discipline at the participating institution as per admission policy of the institution and be enrolled in Undergraduate ( 4Years or 5Years) program
- The eligibility of a candidate is linked to neediness of the candidate as determined by the financial background of his/her family
- Not availing any other educational scholarship during the current academic year

PICTURE

Please give True or False status of the following criteria

True/False

Pakistani/AJK National

Applicant NOT availing any other educational scholarship during the current academic year

### INSTITUTE INFORMATION IN WHICH YOU HAVE TAKEN ADMISSION:

1. Name of Institute admission taken:	
2. Address of the Institute	
3. Discipline / Subject	

### PERSONAL INFORMATION:

4. Applicant's Name:	
5. Applicant CNIC	- - Expiry Date D D M M Y Y Y Y
6. Gender	
7. Applicant Marital Status	Single/ Married / Divorced
8. Applicant Date of Birth	D D M M Y Y Y Y
9. Domicile Province (Tick)	<input type="checkbox"/> Punjab, <input type="checkbox"/> Sindh (Rural), <input type="checkbox"/> Sindh (Urban), <input type="checkbox"/> KP, <input type="checkbox"/> Balochistan, <input type="checkbox"/> AJK, <input type="checkbox"/> FATA, <input type="checkbox"/> Gilgit-Baltistan, <input type="checkbox"/> ICT
10. Domicile District	
11. Father's/Guardian Name	
12. Father/Guardian CNIC	- - Expiry Date D D M M Y Y Y Y
13. Father	Alive / Deceased
14. Father Profession (Tick)	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Business Owner
15. Phone	
16. Mobile No	
17. Are you working (Tick)	<input type="checkbox"/> YES <input type="checkbox"/> NO if YES then what is your Monthly Income? (Rupees) _____
18. Email Address	

### CONTACT INFORMATION:

19. Present Address	
20. Permanent Address	

Applicants Signature

FAMILY INFORMATION								
21. Total Family Members currently living with you								
22. Details of Family Members Earning		S #	Family Member Name	Relationship	Family Member Occupation (Specify)	Monthly Gross Pay/Earning		
		1						
		2						
		3						
		4						
		<b>TOTAL INCOME</b>						
23. Brothers/Sisters studying*		S #	Name	Relation With Applicant	Name & Address of Institute		Fee per month	
		1						
		2						
		3						
		4						
		5						
		6						
		Total Fees & Tuition Charges						
24. Any Other Supporting Person (Mother/ Guardian/ Brother/ Sister/Family Relative/Guardian) (If Applicable)		1. Name: _____ 2. Relationship: _____ 3. Occupation and Designation _____ 4. Monthly Financial Support Available to Applicant in Pak Rs. _____						
25. What type of Transport your family own? (Tick)		<input type="checkbox"/> tractor, <input type="checkbox"/> rickshaw, <input type="checkbox"/> bi-cycle, <input type="checkbox"/> motorcycle rickshaw, <input type="checkbox"/> carriage pick, <input type="checkbox"/> truck, <input type="checkbox"/> car <input type="checkbox"/> Motor Cycle						
26. Applicants educational record*		Level of Study	Name and Location of Institute		Per Month Fee	To - From Year	Total Marks	Marks Obtained
		Matric						
		FA /FSc						

\_\_\_\_\_  
Applicant's Signature

27. Per month fee/ tuition charges of the institution last attended*	
28. How were the admission / Fee charges paid*?	Scholarship, Own Resources, Loan, Relative Support
29. Have you ever got any other Scholarships previously*(Enter Type: Need base, Academic base, Both Type of Scholarship, No Scholarship):	
30. Are you currently availing any other scholarship? (Enter Name of Scholarship)*:	
31. Statement of Purpose* (Explain your suitability for this scholarship) -	

#### INFORMATION FOR OPENING BANK ACCOUNT

Field Name	Data Type	Length	Comments	Field Mandatory / Optional
32. Present Address - Area Code	Numeric	6	check from List/LOV	M
33. Permanent Address - Area Code	Numeric	6	check from List/LOV	M
34. Next of Kin Name	Text	40		M
35. Next of Kin CNIC	Numeric	13	Computerized National Identity Card No.	M
36. Next of Kin Relationship	Numeric	3	check from List/LOV	M
37. Next of Kin Address	Text	80		M
38. Next of Kin Address - Area Code	Numeric	6	check from List/LOV	M
39. Next of Kin Mobile	Numeric	13		
40. Religion	Numeric	3	check from List/LOV	M

#### IF YOU ALREADY HAVE BANK ACCOUNT

Field Name	Data Type	Length	Comments	Field Mandatory / Optional
A/C TITLE	Text	40		M
IBAN NUMBER	Numeric	24		M
BANK ADDRESS	Text	80		M
RELATIONSHIP	Numeric	3	SELF or from LOV	M

#### UNDERTAKING BY THE APPLICANT:

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. Institute reserves the right to use information given in this form for verification and other purposes.
3. Institute reserve the right to reject or cancel any application(s) which it deems to be unsuitable for the scholarship programs. The rejection or selection decision cannot be challenged in any court of Law / Authority

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Applicants Signature