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NATIONAL TEXTILE UNIVERSITY, FAISALABAD HEC Needs Based Scholarship Program SCHOLARSHIP APPLICATION FORM



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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 will appear in panel interview (s).

PROVIDING FALSE INFORMATION MAY RESULT IN FOLLOWING ACTIONS:

- Cancellation of Admission.
- Rustication from the university.
- Initiation of criminal / disciplinary proceedings
- Permanent Disqualification for award of all types of future loan / scholarship / beneficial schemes
- Refund of all the payment received and or a penalty equal to total scholarship amount.

READ CAREFULLY THESE STEPS / INSTRUCTIONS FOR FILLING THIS FORM:

Step No. 01:

- $\checkmark\,$ Read the application form carefully.
- \checkmark Make a photocopy of the application form first
- \checkmark Complete the photocopy form with led pen and make sure everything is correct and final
- ✓ Copy all information from photocopied form to the original form using black or blue ball point only and in capital letters and leave space between words

Important Note for filling Original Application Form:

- \checkmark Answer all questions. Those not applicable should be marked "N/A"
- \checkmark Over writing Cutting and unreadable hand writing may result of resubmission of new form
- \checkmark Check your application for spellings, grammatical errors and factual oversight
- $\checkmark\,$ Furnish factual, comprehensive and authentic information / Calculations in the form
- \checkmark For family financial reporting, parents / guardian may be consulted for guidance
- \checkmark Whenever in doubt or lost, seek help from the Focal Person / Financial Aid Office
- \checkmark Affidavit Needs to be submitted after final selection of the candidate

Step No. 02: Attach the following documents with Application Form / Check List

SN	Description of Att	tachments	Tick the relevant
	1	Copies of computerized NIC of	
	Father Mother Guardian		
	2	Copies of last month's utility bills	
	Electricity Gas Telephone Water		

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3	Copy of last Income Certificate	(if applicable)	
	Father Mother Guardian		
4	Salary Slip or Income Certificate of	(Compulsory)	
	Father Mother Guardian		
Aust atta	ich which is applicable:		
•	Signed & Stamped Salary Slip in case of Private / Govt. J	lob from employer	
	OR		
•	Signed & Stamped Income Certificate issued by Union C Officer in case Business /Land Income/Farmer, Laboure then attach undertaking of Income Certificate on minimu	er on daily wage / shopke	eper /private job,
	OR		
•	Pension Book or Card in case of pensioner.		
(E	Cach information will be verified strictly - False information	on may result permanent	disqualification)

- 5 Attested copy of rent house agreement if rented home (if applicable) 6 Copies of last & latest fee receipts of self and siblings * (Compulsory) 7 Siblings studying on scholarship certificate (if applicable) 8 Copies of Medical bills / expenditure related documents (if applicable) 9 Copies of previous scholarship (s) attained (if applicable) 10 Death Certificate of Parents / Guardian (if applicable) 11 One Picture of House from outside front (Compulsory) 12 Picture of Shop in case of any kind of shop work (if applicable) Fard Jama Bandi (must be duly attested by the concerned Tehsildar) (if applicable) in case of farming profession
- 13 In case of Father/Guardian Working on another shop/business then picture of that shop

Step No. 03

Get final Recheck Signature from Student Financial Aid Office / Advisor Students Office:

(Signature & Date)

NOTE:

Definitions:

Family: Father, mother(s), brother(s), sisters(s), Maternal / Paternal Uncles (s) & Aunts, 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

Kutcha 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 kutcha house.

<u>Semi -Pucca house</u>: 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.

<u>Roof Material:</u> Tiles, GCI (Galvanized Corrugated Iron) sheets, asbestos cement sheet, RBC, (Reinforced Brick Concrete), RCC (Reinforced Cement Concrete) and timber etc.

Others: The houses, which are not covered by the types mentioned above, are to be treated as of 'others' type.

BIO DATA FORM FOR DATA ENTRY (Must be Filled by the Student)

1.	Degree and Department:
2.	Semester:
3.	Student Name:
4.	Father Name:
	Regd. No
	E-mail Address:
	Contact No.
	Mailing/Residential Address:
	Name of Previous Education Institute:
	Per Month Fee of Last Attended Institute:
	Hostel / Day Scholar:
	Marital Status of Candidate: Single /Married:
	Father Status: Alive / Deceased:
	Profession of the Father/ Guardian:
	Total No. of family members living with you:
	No. of family members studying:
	No. of earning hand family members:
	Father /Guardian (Salary/Pension/Business/Laborer/Shopkeeper:
	Mother Income per month (if any):
	Income from Agriculture Land (if any):
	Income from any other sources:
	Total Monthly Income from all sources:
	Total Annual Income from all sources:
25.	Average per month Gas Bill (put average of last six months):
26.	Average per month Electricity Bill (put average of last six months):
27.	Average per month Water Bill (put average of last six months):
28.	Average per month Telephone Bill (put average of last six months):
29.	Per Month Personal Education Expenditures:
30.	Per Month Education Expenditures of the family excluding Personal education expenditure:
	Per Month food/Kitchen Expenditures of the family:
	Per Month Medical Expenditures of the family:
	In Case rented house per month rent:
	Other Misc. Expenditures:
	Total Monthly Expenditure of the family (sum of all expenses):
	Total Annual Expenditures of the family:
	Type of the Vehicle (Car/Motorcycle/others):
	Make & Model of the Vehicle:
	Accommodation (Own/Rented):
	Type of Accommodation (Rural/Urban):
	Size of House:
	Market Value of the House:
	Mentioned the Size of Land/Plot:
	Market Value of the Land/Plot:
	Current Bank Balance:
	Other Misc. Assets/Cattle's:
	Total Assets Values:
48.	Last Degree/ Semester (SGPA/CGPA/Marks):

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					Affix two
Name of	f the University: <u>National 7</u>	Textile Unive	rcity Faicalah	hed	Passport size
	Title / Program:				-
Jegree				—	Photographs
				L	
		Section	n A:		
	Applican		Family Informat		
1	Applicant's Name:			Gender:	Male Female
2 U	University Reg. No:	- N T	U -		
		- 19 1	U -		
3 4	Applicant NADRA				
1	NIC No.				
4 N	Marital Status Single	Married	d Divor	ced	
5 I	Date of Birth:Age	:	Nationality_		
I	Place of Birth (Name of City, G	Country)			
Ι	Domicile:I	District:		Fehsil:	
6 I	Present Address				
	Permanent Address:				
	Are you currently working: Yo				
	If answer is Yes to Section No.	1			
	Job Nature:				
	Name of Employer/Company				
	Previous Employer/Company				
	Total Monthly Applicant Gross				
	Total Monthly Applicant Take				
B 7	Total Annual Applicant Gross				
14 7	* Take Home Income: Salary /	•		-	-
	Tel (Res.):				
	Student's Mobile				
	Total Members in the Family:				
	Total Family Members current				
17.	Total Number of Brothers/Sist	ters married 10t	aı. <u>1</u>	brouners	0181018
S # N	Name of Family Member (s)	Relationship	Marital Status	R	emarks**
1					
2					

3		
4		
5		
6		
7		

**Remarks: List down the number of dependents supported by married brother(s)/ sister(s)

18 Brothers/Sisters/Children/Family Members studying

Details of your own Brothers & Sisters only who are studying (Applicant will write his/her own detail at Sr.No.01

S #	Name	Relation with applicant	Name & Address of Institute	Institute Type (Govt / Private)	Fee per month (Semester Tuition Fee divided 4)	Home / Priviate Tuition Fee Per Month (If applicable)
1		Self				
2						
3						
4						
5						
Colum	n wise Total of Se	mester Tuition l	Fees & Home Tuition Fee			
18	Grand Total of	Both Columns (F	Per Month Semester Dues + Home / Private Tuition Fee)			
	 Father Stademise (decision of the second seco	ntus: Alive d-mm-yy) nal status: Em mployed com	Computerized NDeceased(if) aployedSelf-Employed aplete the sections (22-30) else f ployer:	f deceased please n Retired Un-E	Employed	
	23 Address:					
	24 Tel (Off):		Mobile			
	25 Occupation	on:	G	ovt. Private	Other	s
	36 Designation	on & Grade (1	BPS/ SPS/PTC etc.):			
	27. Total Gros	ss Monthly In	come (Salary/ Pension/ Others):	:		
	28 Total Net	Monthly Take	e Home Income (Salary/ Pension	n/ Others):		
	29 Previous (Occupation (i	f applicable):			
	30 Total Ann	ual Income:		_NTN		

NOTE:

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31.	Mother's Status: Alive Deceased (if deceased please mentioned
	the date of demise (dd-mm-yy))
32	Marriage Relationship: Combined Separated/Divorced
33	Professionals Status: Working Not Working
Aı	ny Other Supporting Person (Mother/ Guardian/ Brother/ Sister/Family Relative/Guardian) [Add
Pa	age if required]
34	Name: Relationship:
35	Address:
36	Tel (Off/Res)Mobile NoNIC no
37.	OccupationGovt. Private
38	DesignationName of Company/Employer
39	Total Monthly Gross Income (Salary/ Pension/ Others)
40	Total Net Monthly Take Home Income (Salary/ Pension/ Others):
41.	Total Net Annual Income
42	Total Earning Members in Family:
43	Total No. of family members not earning44. Monthly Financial Support
	Available from supporting person to Applicant in Pak Rs.

44 Income from Assets If any (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)						
44	Total						

* For sources with annual income returns, kindly report the monthly income earned

45 Details of Family Members Earning:

S #	Family Member Name	Relationship Father Mother Guardian Siblings Self	Family Member occupation ***	Organization Name	Designation	Monthly Income (A)	Monthly Income from Assets (sec.44) (B)	(Make Total of income A & B (A+B)
1								
2								
3								
4								
46	Total Mor (add self-i	nthly Family In ncome, if app	ncome licable) Pak F	Rupees		(A)	(B)	(A+B)

*** Family Member Occupation classification

- 1. Government Service (Specify the employment grade BPS/SPS/PTC etc.)
- 2. Private Job
- 3. Agriculture/Farming
- 4. Own Business (Self Employed). Details/nature of self-business need to filled in at remarks column
- $5. \quad {\rm Others. \ Details/nature \ of \ self-business \ need \ to \ filled \ in \ at \ remarks \ column}$

FAMILY EXPENDITURES

47. Accommodation Expenditures (Please Check the relevant boxes)
a) Type: Bungalow Apartment /Flat Town House Village House
b) Structure : Pucca House Kutcha House Semi Pucca House Others (Detail available at Page 1 & 2)
c) Status: Rented Self or Family owned Employer / Govt Owned
d) Rent Payment: Self Employer/Govt Others
Total Size of the House in Sq. ftCovered Area in Sq. ft (Sq. = No. of Marla x 272)
e) Residence Location: Rural Urban

NOTE:

NOTE:

48. Accommodation Details:

S #	Accommodation Location /Address	Number of Bed Rooms	Number of Air conditioners	Accommodation Monthly Rent (if applicable)	Accommodation Annual Rent (if applicable)
48	Total Accommodation	1-2 2-4 4-6 6-8 Above 8 Rental Expenditure	Ni1 1-2 3-6 6-8 Above 8		

- a) No. of servants in the Home:
- b) Any other house/flat owned by the Parents/Guardian____(Yes / No)
- c) (if yes please specify with location and Six ______

49. Utilities Expenditures

Last Month Utilities Paid				
Telephone	Electricity	Gas	Water	

		ge of Last Six Mo l prev. 6 months j	,		8
S #	Telephone	Electricity	Gas	Water	Total
49					

Please write N/A which facility is not available

- **51. Family's Medical Expenditures:** Average of last six months (Per Month Expenditure)

 Which is your Medical Facility:
 Government / Employer_____Self:_____

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52. Travelling/ Miscellaneous Expenditures

Average of last six months (Per Month Expenditure)____

Total Family Expenditures

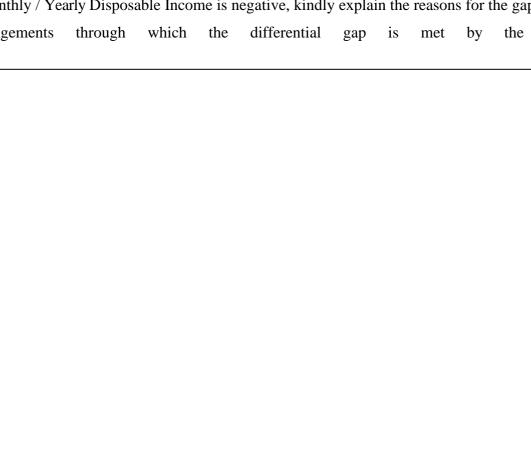
S #	Education Expenditure Grand Total (Sec. 18)	Accommodation Expenditure (Sec. 48)	Utilities Expenditure (Sec. 49)	Food Expenditure (Sec. 50)	Medical Expenditure (Sec. 51)	Misc. Expenditure (Sec. 52)	Total Monthly Expenditure (52.A)
52							

1	S #	Description	Amounts in Pak Rupees
	(Sec.46)	Total Monthly Income	
	(Sec. 52-A)	Total Monthly Expenditure	
	*Net Monthl	y Disposable Income	

(*Net Monthly Disposable Income = Total Monthly Income - Total Monthly Expenditure

* If the monthly / Yearly Disposable Income is negative, kindly explain the reasons for the gap, and

the	arrangements	through	which	the	differential	gap	is	met	by	the	family
	0	U				01			•		•



Section B: Cumulative information of Self, Parents and Guardian Assets

Assets (with current market value)

53. Does the family own any Transport? Yes

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					
3					
4					

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

54. Number of Cattle(s) (with kind)

55. Area and location of Land(s)/Plot(s)/House(s)/Fat(s) owned _____

Assets Title	Qty	Size	Location (Address)	Cultivable Area	Agricultural Yield per Acre
Residential					
Commercial					
Agricultural					
Employer/ Govt					
Scheme					

56. Assets worth (Current Market Value in Pak. Rs.)

S #	Assets Title	Father (A)	Mother (B)	Spouse (C)	Self (D)	Family Owned/ Guardian (E)	Total =(A+B+ C+D+E)
1	House						
2	Business						
3	Land & Building						
4	Bank Balance						
5	Stocks/Prize bond						
6	Others/ Cattle(s)						
56	Total						

NOTE:

No

NOTE:

Section C:

Financial arrangements for Current Year (current & next semesters)

58. Please mention annual Funds arrangement of your Education / Fee (in Pak Rupees)

S #	From Source Income	Father	Mother	Spouse	Self	Other	Total
1	Salary / Earnings						
2	Family / Friend Advances						
	& Loan *						
3	Bank Loan						
4	Other (Specify)						
58	Total						

* Family/ Friend Loan (Specify relationship with the relative / friend)

59. Any source of financing other than this scholarship (Please specify)

60. How were the admission / first semester charges paid? (for 1st semester students only)

Section D: Applicant Educational Record

Level of Study	Name of the Institute	*Address of the Institute	Period (Start & End Date)	Per Month Fee	Division/ GPA/ Grade
Bachelors					
Intermediate					
Higher					
Secondary					
Secondary					
Primary					

* At least the name of the City is required in the field.

61. Have you ever awarded any other scholarship before: Yes 🗌 No 🗌

(If yes fill the details of scholarships & attach documentary proof of the scholarships)

S #	Name of Institute	Scholarship Name	Total Scholarship Amount	Total Scholarship Period	Class / Level at which Scholarship was granted
1					
2					
3					

Statement of Purpose (Explain your suitability for this scholarship) - attach separate sheet if required

UNDERTAKING

- 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 reserves the right to use information given in this form for verification and other purposes.

Date: Date: Parents / Guardian Signature____ Date: Applicant Signature: _____ NOTE:

For Official use only

No

Are the applicant documents in order? 🗌 Ye	Are t	he applic	ant docum	ents in o	rder?] Yes
--	-------	-----------	-----------	-----------	-------	-------

The notices furnished to the applicant for furnishing of required documentation

S #	Notice Date	Document Name Missing	Document	Remarks
5#	Notice Date	Document Name Missing	Submission Date	Remarks
1				
2				
3				
4				
	cation Case Rev	iew Dates (i)	(ii)	
Additi	onal Remarks			
Date		Department Name	Signature Head of De	partment / Focal Person