Punjab Educational Endowment Fund (PEEF) Scholarship Application Form 2010-Session

Affix attested recent photograph

ELIGIBILITY

- 1. Must have passed BA / BSc. / B.Com or equivalent examination held in 2010 (annual)
- 2. Must have passed above mentioned examination from the government/private eligible institutions(private candidates are not eligible to apply)
- 3. Only students of Punjab domicile can apply
- 4. Both male and females can apply
- 5. Not achieved less than 60% marks in BA/BSC/B.Com examination
- 6. Only students whose monthly family income is equal to or less than Rs. 15,000/- can apply

INSTRUCTION FOR FILLING OUT THE NEED BASED MERIT SCHOLARSHIP FORM

- Read every field carefully, it is advised to photocopy the form and fill it before filling the original application form to make sure all information is correct and final.
- Fields followed by a footnote should be filled after reading the footnote section given at the end of page.
- Write in block letters.
- Keep a photocopy of the filled-in form for your record.
- Ensure that you have attached all required documents by completing the checklist.
- Answer all questions. Those not applicable should be marked "N/A".
- For family financial reporting parents/guardians should be consulted.
- Fields marked with a tick mark (/) should only be answered in the same.
- Do not overwrite or cross any information on the form.
- Do not provide False or Incomplete information or one that cannot be supported with proof.
- A complete file should be made containing: first the attached form then all the photocopies of mentioned documents in the following checklist.
- Use extra sheet (if required).

CHECK LIST

- 1. Attested copies of Mark sheets
- 2. Attested copy of domicile
- 3. Income affidavit on stamp paper (sample available at www.peef.org.pk).
- 4. Student three passport size photographs (blue back ground).
- 5. Attested copies of CNIC (Father, Mother or Guardian)
- 6. Copies of last three months Utility Bills
 - a. Telephone
 - b. Gas
 - c. Electricity
- 7. Statement of purpose
- 8. Disability certificate from DHQ (if applicable)
- 9. Copies of Rent agreement (if any)
- 10. Any other supporting document required to substantiate the facts given in the application form.

1. Personal Information:						
First Name:	rst Name: Mid		Middle Name:		Last Name:	
C.N.I.C. Number:						
Birth Date (dd/mm/yy):			Gender:	Male	Female	
Postal Address:						
City:	Domicile:				Province:	
Telephone Number:	Mobile N	lumber:			Email Address:	
Disabilities (if any)1::						
Father/ Guardian's Name:						
Relationship: Father	М	other]	Other (spec	ify):	

¹ Please provide proof of disability in the form of Disability Certificate issued by DHQ

Certificate/Diploma/ Degree	Major Subjects	Year of Passing	% of Marks	CGPA	Institution	Board/University		
SSC/Matric								
HSSC/Intermediate								
Bachelors (B.A,BSc, Hons. etc.)								
Other (please specify)								
3. Current Educatio	nal Institute I	nformati	on:					
Name of Institution:								
Degree / Course in which	enrolled:			Roll No./Student ID:				
Expected date of commencement of Degree / Course(dd/mm/yy):			Expecte	Expected Date of Completion(dd/mm/yy):				
Duration of Degree Course:			Departm	ent Name:				
Name of Head of Department:			Contact	No.:				
Mobile:			Email:					
Complete Address of the University/Department:								
3 A. Hostel Verification								
If Boarder please provides the verification from the hostel warden (please write n/a if the applicant is a day scholar):								
Name of Hostel Warden:			Signature of Hostel Warden:					
Official Stamp:				Date of verification ((dd/mm/yy):			

2. Previous Academic Qualifications:

4. Family Information:								
Fathers'/Guardians Information:								
Full Name: Age:								
Postal Address: (if different from yours)								
City:			Telephone Number:		Mobile	Number:		
					•			
Is yo	ur father currently emp							
If Ye	s Govt. Employee: Lired/unemployed, spec			Grade	(if Govt. Employe	ee):		
Curre	ent Employment (if app	olicable)						
	artment/Organization:_	•						
	gnation:				f Joining(dd/mm/	yy)		
					O.			
If reti	red/unemployed, spec	ify since when (r	nm/yy)					
	many of your family m							
Pleas	se provide information	for all the family	members, depender	nt on your p	arents' income. l	Jse a separate she	et, if needed.	
Sr.	- ""	Relationship	Name of	Current	Tuition	Scholarships	Parents'	
No.	Full Name	to Parents	School/College	Class	Fees(Annual)	(Annual) (if any)	Contributio n (Annual)	

Particulars	Annual Salary ²	Business Income (if any))3:	Total			
ather:						
Mother:						
Self:						
Sibling(s):						
Total						
Please specify Annual in	ncome information from	n the sources mentioned below:				
a. Agriculture Income:		Rs.				
b. Income from Savings (Interests/Dividends):		Rs.				
c. Pension:		Rs.				
d. Real Estate Holdings:		Rs.				
e. Support from Relative(s):		Rs.				
f. Other (please specify):		Rs.				
Total Annual household incom	me:	Rs.				
6. Total Assets:						
Is the house you live in owned by	by your family?					
Yes Year of Purchase	: Original Purch Price (Rs.):	ase Present market va	alue(Rs.):			
No Please explain w	hy (e.g. living with grandpare	ents, inherited, etc):				
	r plot(s), house(s), or any oth	er type of land(s) Yes	No 🗌			

5. TOTAL INCOME:

² Please attached attested copy of previous month salary. ³ Please attach last years' tax return certificate

If you answered YES to the above, please provide the following information on each of these piece(s) of land(s)						
Number of	Loc	cality Area (K	anals/Marlas or Sq. Feet)			
Plots						
Houses						
Buildings						
Other (Specify):						
L	1					
Does your family own any	automobiles(s) Yes	No 🗌				
	Make	Manufactured Year	Engine CC			
If Yes, Car 1						
7. Total Average Fam	nily Expenses(Annual):	Rupe	es			
a. Educational Expenses:						
b. Electricity Bill⁴:						
c. Food:						
c. Food: d. Medical Expenses:						
	olicable):					
d. Medical Expenses:						
d. Medical Expenses: e. Rent or Mortgage (if app						
d. Medical Expenses: e. Rent or Mortgage (if app f. Fuel and Car Maintenand						
d. Medical Expenses: e. Rent or Mortgage (if app f. Fuel and Car Maintenanc g. Loan Payments:						
d. Medical Expenses: e. Rent or Mortgage (if app f. Fuel and Car Maintenanc g. Loan Payments: I. Taxes:						

⁴ Please attached photo copies of utility bills paid during last three months

Please provide information of two persons who are	not related to you, but know you and you	r family, e.g. Neighbors or			
family friends etc.					
Refference1:	Reference 2:				
Name:	Name:				
CNIC #:	CNIC #:				
Contact No.:	Contact No.:				
Address:	Address:				
Address.	Auuless.				
Profession:	Profession:				
9. STATEMENT OF PURPOSE :					
Explain your suitability for this scholarship (use extr	ra sheet if required):				
UNDERTAKING:					
I confirm that information provided in this	application is factually true to the best of	of my knowledge and any			
false information provided can result in cancellation of my application and I would be legally responsible to					
refund all payment received and/or penalty equivalent to total scholarship amount, if awarded.					
 Decision of PEEF regarding the award/oth 	erwise of scholarship shall be final and w	ill acceptable to me.			
Students Signature:	Parent/Guardian's Signature	Date:			

8. Reference:

Received By:	Date						
Signature:	Signature:						
Remarks:							
Date of assessment:							
Recommendations of Scholars	hip Award Committee:						
SCHOLARSHIP AWARD COMM	IITTEE						
Name	Designation	Signature	Date				
1.							
2.							
3.							
SCHOLARSHIP AWARDED: Yes No							
REMARKS OF SCHOLARSHIP COMM	IITTEE:						

A. For Office Use Only