

UAF - Need Based Scholarship Program FINANCIAL ASSISTANCE FORM Application Form Academic Year 2010-11

Scholarship is based on assessment of need and merit. Selection will be made on the basis of information provided in this form and investigations for the authentication of given information. Candidate will be required to appear for interview(s). Incomplete application and claims without supporting documents will not be entertained. Students admitted on self finance/ Self support programs and awarded punishment or imposed any Major/Minor penalties on disciplinary grounds are not eligible to apply.

PROVIDING FALSE INFORMATION

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 the award of any future loan/scholarship.
- Refund of all the payment made and / or a penalty equal to total scholarship amount if information provided by the students will be found false at any later stage.

INSTRUCTIONS FOR FILLING THE SCHOLARSHIP APPLICATION FORM:

- \checkmark Fill in the form using black ball point pen and write in capital letters
- \checkmark Fill in the application form carefully.
- \checkmark Make a photocopy of the application form
- \checkmark Complete the photocopy form and make sure everything is correct and final
- \checkmark Copy all information from photocopied form to the original form
- ✓ Submit duly completed application form in the Directorate of Financial Assistance and University Advancement well before due date.
- \checkmark Furnish factual, comprehensive and authentic information in the form
- ✓ For family financial reporting, parents/guardian may be consulted for guidance
- ✓ Whenever in doubt or lost, seek help from the Focal Person/ Director Development or Manager Student Financial Assistance.
- ✓ Check your application for spellings, grammatical errors and oversights
- ✓ Keep a photocopy of the filled-in application form for your record
- \checkmark Ensure that you have attached all the required documents by putting a tick mark in checklist
- \checkmark Answer all questions. Those not applicable should be marked "N/A"
- \checkmark Affidavit needs to be submitted after final selection of the candidate

Definitions:

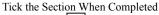
Family: Father, mother(s), brother(s), sisters(s), Maternal / Paternal Uncles (s) & Aunts, Grandparents etc.

Application Form Check List SN Description Tick the relevant Copies of computerized NIC of 1 Father Mother Guardian 2 Income Tax Certificate Father Mother Guardian 3 Copy of last Income Tax Return of Father Mother Guardian Salary Certificate of 4 Father Mother Guardian 5 Copies of last twelve (12) months utility bills Electricity Gas Telephone Water 6 Attested copy of rent agreement 7 Copies of last & latest fee receipts of self and siblings * 8 Copies of Medical bills/ expenditure related documents 9 Copies of pervious scholarship(s) attained 10 Statement of Purpose * Siblings are brother & sisters Section A: Personal and family information Ι Π 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 hand to the SFAO.

- Place documents in right order as per above sections (1 to 10) •
- Put all amounts in Pak Rupees. •
- 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. •



	sity of Agriculture, Faisalabad			Ра	nge 3 of 12
	e of the	- 4			Paste the
	rtment/Faculty/College/Institu				
Degre	ee Title / Program:				Picture
	Section A:	Applicant Pers	onal and Family	Information	
1.	Applicant's Name:			Gender: Male	Female
2.	University Reg.No				
	/Roll No and Section:				
3.	CNIC No.				
4.	Marital Status Single	Marrie	d Divor	cced	
5.	Age : Place of I	Birth			
6.	Present Address				
7.					
8.	Are you currently working :	Yes	No		
9.		· •	· · · · ·		
	Designation:				
10). Previous Employer/Company	Name (if applic	cable):		
	. Total Monthly Gross Income				
12	2. Total Monthly Take Home Ind	come Rs.			
13	3. Total Annual Gross Income R	s.: N	NTN No		
	* Take Home Income: Salary	/ Pay available afte	er deduction of taxes,	provident fund charges etc.	
14	4. Tel (Res.):	Mobile	:		
1:	5. Email:				
10	6. Total Members in the Family:				
11	7. Total Family Members curren	tly living with y	/ou:		
18	8. Total Number of Brothers/Sis	sters married			
S #	Name of Family Member (s)	Relationship	Marital Status	Remarks**	
1					
2					
3					
4					
5					
6					
7					
<u> </u>		1			

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

19. Total Earning Members in Family:

20. Details of Family Members Earning:

S #	Family Member Name	Relationship	Family Member occupation ***	Organization Name	Designation	Monthly Gross Pay/Earning	Remarks
1							
2							
3							
4							
20	Total Monthly Family Income (add self income, if applicable) Pak Rupees						

*** Family Member Occupation classification

- 1. Government Service (Specify the employment grade /BPS.
- 2. Private Job
- 3. Agriculture/Farming
- 4. Own Business (Self /Employed). Details/nature of self business need to filled in at remarks column
- 5. Others Expenses
- 21. Total No of family members not earning _____

22. Brothers/Sisters/Children/Family Members studying _____

Details of Siblings Studying

S #	Name	Relation with applicant	Name & Address of Institute	Fee per Annum (Rs)
1				
2				
3				
4				
5				
6				
22	Total Fees & T	Fuition Charges	5	

23. Father's Name: C.N.I.	C. No
24. Status: Alive Deceased	
25. Professional status: Employed Retired	Business Owner
26. Name of Company/Employer:	

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27. Address:			
28. Tel (Off):			
29. Occupation Type:			
30. Designation & Grade (BPS)	:		
31. Total Gross Monthly Income	e (Salary/ Pension/ Othe	ers) Rs.:	
32. Total Net Monthly Take Hor	ne Income (Salary/ Pen	sion/ Others)Rs	
33. Previous Occupation (if app	licable):		
34. Total Annual Income Rs.:		NTN	
35. Any Other Supporting Perso	n (Mother/ Guardian/ E	Brother/ Sister/Family Relat	ive/Guardian):
36. Name:	Re	elationship:	
37. Address:			
38. Tel (Off/Res)	Mobile No	CNIC No	
39. Occupation			
40. Designation	Name of Con	npany/Employer	
41. Total Monthly Gross Income	e (Salary/ Pension/ Othe	ers) Rs	
42. Total Net Monthly Take Hor	ne Income (Salary/ Pen	sion/ Others) Rs.:	
43. Total Net Annual Income Rs			
		Rs	

45. Asset Income (on monthly basis)

S #	Income Source	Father	Mother	Spouse	Self	Other	Total
1	Property Rent (Rs)						
2	Land Lease (Rs)						
3	Bank Deposits* (Rs)						
4	Shares / Securities* (Rs)						
5	Other (Specify) (Rs)						
45	Total (Rs)						

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

University of Agriculture, Faisalabad

46. Total Family Monthly Income (Rs)

			Monthly Income	Monthly Gross	Monthly Net
S #	Family Member Name	Relationship	from Assets	Pay/Earning	(Take home)
			(Sec. 45)		Pay/Earning
1					
2					
3					
4					
5	Applicant Monthly Gross	Pay/Earning			
	(Sec. 11)				
6	Applicant Monthly Net (T	ake home)			
	Pay/Earning (Sec. 12)				
46-A	Total Monthly Incom	e (Rupees)			
46-B	Total Annual Income	(Rupees)			
47.	FAMILY EXPENDIT	URES	1		

48. Accommodation Expenditures

Type: Bungalow	Apartment /Flat	Town House 🗌 Village House 🗌
Status: Rented	Self or Family owned	Employer / Govt Owned
Rent Payment: Self	Employer/Govt	Others
House Plot Size in Sq. ft	Covered A	Area in Sq. ft

S # Accomm Location /		Air conditioners (No)	Accommodation Monthly Rent (Rs)	Accommodation Annual Rent (Rs)
48 Total Accon	1-22-44-66-8Above 8Immodation Rental Expendence	1-2 2-4 4-6 6-8 Above 8		

Any other house/flat owned by the Parents/Guardian (if yes please specify with location and size)

University of Agriculture, Faisalabad

49. Utilities Expenditures

Last Month Utilities Paid (Rs)					
Telephone	Electricity	Gas	Water		

Average of Last twelve Months (Per Month Utilities Bills) (Rs)							
	Telephone	Electricity	Gas	Water	Total		
49							

- 50. Monthly Food /Kitchen Expenditures Rs.
- 51. Monthly Medical Expenditures: (Average of last twelve months) Rs_____
- 52. Monthly Travelling/ Miscellaneous Expenditures Average of last twelve months Rs._____

Total Family Expenditures (Rs)

	Education	Accommodation	Utilities	Food	Medical	Mise.	Total Monthly	Total Annual
S #	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure
	(Sec. 22)	(Sec. 48)	(Sec. 49)	(Sec. 50)	(Sec. 51)	(Sec. 52)	(52.A)	(52.B)
52								

S #	Description	Amounts (Rupees)
(Sec.46-A)	Total Monthly Income	
(Sec. 52-A)	Total Monthly Expenditure	
53-A (46.A - 52.A)	Net Monthly Disposable Income*	

S #	Description	Amounts (Rupees)
(Sec.46-B)	Total Annual Income	
(Sec. 52-B)	Total Annual Expenditure	
52-B (46.B - 52.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 this negative gap is met by the family

Page 8 of 12

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

Assets (with current market value)

53. 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					
3					
4					

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

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

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

Assets Title	No.	Total size (sq.ft)	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	Mother	Spouse	Self	Guardian	Total
1	House						
2	Business						
3	Land & Building						
4	Bank Balance						
5	Stocks/Prize bond						
6	Others/ Cattle(s)						
56	Total						

57. Taxes paid (per annum. Rs)_____

Section C: Financial arrangements for current year

58. Funds Availability for Applicant Education (per annum in Pak Rupees)

S #	Income Source	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 university charges paid?

Section D: Applicant Educational Record

Level of Study	Name and Location of Institute	Monthly Fee (Rs)	From-To month/ yr.	Division/ GPA /Grade	%age / CGPA
B.Sc					
F.Sc					
Matriculation					

61. Monthly fee/ tuition charges of the Institution last attended Rs._____

62. Have you been ever awarded	any other scholarship	before:	Yes [No
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(If yes fill the details of scholarships & attach documentary proof of the scholarships)

S #	Name of Institute	Scholarship Name	Monthly Scholarship (Rs)	Scholarship Period	Class / Level at which Scholarship granted
1					
2					
3					

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

UNDERTAKING

- 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 the grant of financial assistance, the UAF will stop further assistance and the student will have to refund all payment received and or penalty equal to total scholarship amount paid to candidate.
- 2. The UAF reserves the right to verification the information given in this form.

Date:	Date:
Date: Parents / Guardian Signature	Applicant Signature:
Hall warden for Boarders	DSA for Non-boarder

For Official use only

Are the applicant's documents in order? Yes

No

The notices furnished to the applicant for furnishing required documentation

S #	Notice Date	Document Name Missing	Document Submission Date	Remarks
1				
2				
3				
4				

Signature (Receiving person)

Additional Remarks

SPECIMEN

To be executed on stamp paper, Other papers not acceptable, type one side of paper only.

This Affidavit needs to be submitted after final selection

Deed of Agreement

For Undertaking a Course of Studies under the scheme" UAF- Need Based Scholarship Program for UAF Students "

Mr./Ms Son/ daughter of					
CNIC No.		University Reg. No/ Roll No			
Dept./Faculty	y./Inst./College				
Hereby calle	ed the approved	student has been selected by University of Agriculture, Faisalabad for the award of scholarship under UAF-Need based			
scholar	ship program in	n the field of study of (discipline) for completion of (program). The			
approve	ed student has ag	greed to accept the award of the scholarship on the terms and conditions governing the scholarship award.			
Now the	is deed witnesse	s as under:			
i) iii) iv) v) vi)	regulations The student approval of The student In case the s the payment The parents.	nt of amount(s) admissible under the scholarship program shall be made subject to the complete adherence to all rules and governing the scholarship program as well as satisfactory performance in the authorized studies. shall not change the specified course of studies nor register himself/herself for any other course or program without prior the University. shall not extend the specified period of studies. scholar fails to qualify the course/degree for which he/she was awarded scholarship, the UAF reserves the right to recover all received and or a penalty equal to total scholarship amount from the scholars/Guarantor. /Guardian of the student are unable to financially support his/her education. ship will be terminable in the following cases:			
	a) b) c) d) e) f)	If the student fails to maintain class attendance of 75% If the student is involved in malicious/undesirable activities. If the student fails to obey or act in accordance with UAF order directing him/her, he/she will be liable to action under the acts/rules in force in the country. If the student is punished because of his involvement in violation of the university rules, damage to institute property, misbehavior with staff or colleagues or any other disciplinary action. If the information provided by the student is found incorrect at any time during his study period. If the student fails to maintain academic standards of the university.			
governi	ing scholarship a	ward and / or his/n her failure as directed by the UAF for the specified period, the student shall be bound to obey the orders and by the UAF shall be final and conclusive.			
IN WITNES	S WHEROF, the	parties aforementioned have signed this deed in token of acceptance thereof.			
Date:		Date:			
Signature of	Signature of Student Signature of Parent/Guarantor				
Name:	Name: Name:				
CNIC No:		CNIC No:			
Signature of	Witness No. 1 _	Signature of Witness No. 2			
Name:	ame: Name:				

CNIC NO:

Note: Perhaps required after the award

CNIC NO: