

**Government of Pakistan**  
**National Education Foundation**  
Ministry of Education and Professional Training  
Taleemi Chowk, G-8/4 Islamabad

**APPLICATION FORM FOR SCHOLARSHIP**

Please read and fill the application form carefully. Furnish authentic and comprehensive information. Attach all relevant documents. Answer all questions and mark N/A for not applicable. Incomplete application form will be rejected. Arrange the form as per serial number mentioned in check list.

Check list

S. No.	Description	Check List
1	Application form	
2	Applicant's attested CNIC/ B. form copy	
3	Parents attested CNIC copies	
4	Parents attested pay slips	
5	Attested copy of rent agreement if any	
6	Attested copy of house document , in case of owned house	
7	Attested copy of pension slip parents	
8	Death certificate of parents if deceased	
9	Parents' Bank statement of last six months	
10	Last month Utility bills – electricity , water, gas, telephone etc	
11	Income certificate of parents on pro forma	
12	Attested copy of fee slips of siblings including applicant	

**Acknowledgment**

Name of applicant \_\_\_\_\_ Father's name \_\_\_\_\_

Session \_\_\_\_\_ Date of submission \_\_\_\_\_

Received by \_\_\_\_\_

**NATIONAL EDUCATION FOUNDATION**  
Application form for scholarship

**STUDENT'S INFORMATION**

- |                            |                                   |
|----------------------------|-----------------------------------|
| 1. Name _____              | 2. CNIC #/ B. Form _____          |
| 3. Date of Birth _____     | 4. School/ Institution _____      |
| 5. Class/ Degree _____     | 6. Roll No/ Registration No _____ |
| 7. Session/ semester _____ |                                   |

**PARENT'S INFORMATION**

- |                                           |                                             |
|-------------------------------------------|---------------------------------------------|
| 8. Father's Name _____                    | 9. CNIC No. _____                           |
| 10. Occupation/ organization /grade _____ | 11. Father's monthly income _____           |
| 12. Mother's Name _____                   | 13. CNIC No. _____                          |
| 14. Occupation/ organization /grade _____ | 15. Mother's monthly income _____           |
| 16. Any other source of income _____      | 17. Total monthly income of household _____ |

**ASSETS INFORMATION**

- |                                   |                                    |
|-----------------------------------|------------------------------------|
| 18. Own house size _____          | 19. If rented , monthly rent _____ |
| 20. Land size/ value if any _____ | 21. Value of Shop if any _____     |
| 22. Car/ motor bike etc _____     | 23. Any other property _____       |

**PARTICULARS OF SIBLINGS**

Name	Age	Class/Degree	School/ College/ University	Monthly fee

Note: Attested copies of the certificate and fee slips must be attached

**MONTHLY UTILITY BILLS**

Note: Attested copies of the utility bills must be attached

<b>Month</b>	<b>Utility</b>	<b>Amount in Rs.</b>
	Water	
	Gas	
	Electricity	
	Telephone	

- 25. Is applicant receiving any other scholarship or aid (yes/no)\_\_\_\_\_
- 26. State the source and amount of scholarship

\_\_\_\_\_  
Signature of the applicant

\_\_\_\_\_  
Signature of parent/ guardian

Dated: \_\_\_\_\_

**UNDERTAKING**

I Mr./Mrs.\_\_\_\_\_ Father/Mother/Guardian of Mr./Ms.\_\_\_\_\_ student of class \_\_\_\_\_ school\_\_\_\_\_ hereby undertake that in case of any false information/ forged document, I shall refund the scholarship amount and deposit the equal amount as fine and be liable to face any legal action.

\_\_\_\_\_  
Signature of parent/ guardian

**INCOME STATEMENT CERTIFICATE**

**Please fill the relevant Income Certificate**

I Mr./Ms. \_\_\_\_\_ Father/Mother of Mr./Ms. \_\_\_\_\_  
CNIC/# \_\_\_\_\_ here by, truthfully state the following;-

1. I am a self employed person and running the business of \_\_\_\_\_
2. The name of the business/shop is \_\_\_\_\_
3. The address of my business /shop is \_\_\_\_\_
4. The business/ shop location is owned by \_\_\_\_\_
5. I deal in the following main commodities \_\_\_\_\_
6. My total annual income from this business/shop is Rs. \_\_\_\_\_
7. I have \_\_\_\_\_ number hired workers.

I have knowing and willfully stated the above facts are wrong my child's financial aid application should be cancelled.

\_\_\_\_\_  
**Signature & Name business/shop Owner**

\_\_\_\_\_  
**Date**

I Mr./Ms. \_\_\_\_\_ Father/Mother of Mr./Ms. \_\_\_\_\_  
CNIC# \_\_\_\_\_ here by, truthfully state the following;-

1. I along with my all family own (land size) of agricultural ans situated (**complete address of where is situated**).
2. I cultivate (**name of crop cultivated**) crop on this land.
3. My annual income from the sale of the crop is Rs. \_\_\_\_\_
4. I have \_\_\_\_\_ number of hired workers working on my land.

I have knowing and willfully stated the above facts are wrong my child's financial aid application should cancelled.

\_\_\_\_\_  
**Signature & Name**

\_\_\_\_\_  
**Date**

I Mr./Ms. \_\_\_\_\_ Father/Mother of Mr./Ms. \_\_\_\_\_  
CNIC# \_\_\_\_\_ here by, truthfully state the following;-

1. I work as a laborer /private worker.
2. My nature of work is (Describe it).
3. My duly income all sources its Rs. \_\_\_\_\_

I have knowing and willfully stated the above facts are wrong my child's financial aid application should be cancelled.

\_\_\_\_\_  
**Signature & Name**

\_\_\_\_\_  
**Date**

**Government of Pakistan  
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**NEED BASED FINANCIAL ASSIASTANCE OF WIDOW**

S.No \_\_\_\_\_

Date:- \_\_\_\_\_

1. Name of Teacher (Husband): \_\_\_\_\_

2. CNIC of Husband #

						-								-	
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3. Name of Institution where he was employed: \_\_\_\_\_

4. Designation: \_\_\_\_\_ BPS \_\_\_\_\_ Monthly Pension Rs. \_\_\_\_\_

5. Particulars of guardian supporting financially:

S.#	Name	Profession	Monthly Income	Relationship with Applicant
1)				
2)				
3)				

6. Details of any other source of income of the family: \_\_\_\_\_

7. Name of the widow: \_\_\_\_\_

CNIC #

						-								-	
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8. No. of the Children: Sons \_\_\_\_\_ Daughters \_\_\_\_\_

9. Status of the Widow: Working \_\_\_\_\_ Non working \_\_\_\_\_

10. If yes please specify the name of the Organization: \_\_\_\_\_

11. Designation: \_\_\_\_\_ Grade \_\_\_\_\_ Monthly Salary Rs. \_\_\_\_\_

12. In case any children of the widow has been receiving scholarship from this foundation please give details:-

Name of the Student: \_\_\_\_\_

Institution where studying: \_\_\_\_\_

Class/Term: \_\_\_\_\_

Amount of Scholarship: \_\_\_\_\_

13. Details of other children studying in school/college:

S.#	Name of Student	Class	Sessions	Name of School/ College

14. Permanent address: \_\_\_\_\_

15. Present address: \_\_\_\_\_

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**CERTIFICATE**

16. It is certified that information provided above is true and nothing has been concealed. In case, I am found guilty of providing any wrong information /concealing anything. I will pay back the whole amount of financial assistance received to National Education Foundation.

Date: \_\_\_\_\_ Signature of widow: \_\_\_\_\_

Signature of Guardian if any: \_\_\_\_\_

17. It is certificate that the applicant's son/ daughter is not receiving scholarship from any other source including Baitulmall.

18. It is certificate that the above entries made by the applicant are correct and he/she deserves financial assistance from the foundation.

*(Signature of the Gazetted Office)*

*With office stamp*

19. The following documents must be attached with this from:

- (1). Attested Photocopy of Form "B" & CNIC
- (2). Attested Photocopy of N.I.C card of Husband & widow.
- (3). Service certificate of husband and widow if employed from concerned institution & duty verification by Directorate of Education
- (4). Attested photocopy of Death certificate.
- (5). Attested copy of Monthly pension slip.