NUTECH - Needs Based Scholarship Form

	Name of the Department.
	Degree Title/ Program:
1.	Applicant'sName:
2.	Gender: Male Female
3.	Applicant CNIC No.
4.	Marital Status Single Married Divorced
5.	Age: Domicile:
6.	Present Address
7.	Permanent Address:
8.	Are you currently working: Yes No
9.	If answer is Yes to Section No. 8, then complete the sections (9-11)
10.	Designation: Name of Employer/Company:
11.	Total Monthly Applicant Gross Income in Pak Rs
12.	Tel (Res.):
13.	Father's Name: Computerized N.I.C. No
14.	Status: Alive Deceased Deceased
15.	Professional status: Employed Retired Business Owner
16.	Name of Company/Employer:
17.	Tel (Off): Mobile:
18.	Occupation Type:
19.	Designation & Grade: Gross Monthly Income (Attach Pay/Pension Slip):
20.	Mother's Name: Computerized N.I.C. No
21.	Occupation: Gross Monthly Income (Attach Pay/Pension Slip):
22.	Any Other Supporting Person (Family Relative/Guardian):
23.	Name: 24. Relationship:

25.	Occupation and Design	gnation:	

26. Details of Family Members Earning(Take extra sheet if required):

Sr. No	Family Member Name	Relationship	Family Member occupation* (Specify)	Organization Name	Designation	Monthly Gross Pay/Earning
1						
2						
3						

^{*} 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). Detail/ Nature of self-business need to be filled in at remarks Colum).
- 5. Others.

27. Family Details:

Sr. No	Brothers/Sisters	Age	Profession	Married/ Unmarried	Remarks
1					
2					
3					
4					

28. Details of Siblings Studying:

Sr. No	Name	Relation with Applicant	Name & Address of Institute	Institute Type (Public/Private)	Tuition Fee Per Month **	Misc Educational Expenses (B)	Total Education Expenses (A+B)
1							
2							
3							
4							
5							

^{**} In case of semester fee, calculation be done on monthly basis.

29. Asset Income (Monthly Basis)

Sr. No	Income Source	Father	Mother	Spouse	Self	Other	Total
1	Property Rent						
2	Land Lease						
3	Bank Deposits						
4	Shares/Securities						
5	Other(Specify)						
Total							

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

Sr. No	Assets Title	Qty	Size	Location(Address)
1	Residential Plots			
2	Commercial Plots			
3	Agricultural Land			
4	Employer/Govt Scheme Plots			

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

Sr. No	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)						
Total .							

32.	Any Other Income (Per Month)	

33.	Expenditure ((Per Month)
JJ.	L'ADCHUIUI C	

		Expendi	ture Type			Cost	per Month		
C	Grocery/ Fo	ood							
Accommodation									
N	Medical								
J	Jtility Bills	s (Electricity, Gas	s, Water of last mo	nth					
Т	ravelling	Expenses							
A	Any Other	(Specify)							
		Descriptio	n		An	nounts in Pa	ak Rupees		
Т	Total Mont	thly Income							
Т	Total Mont	thly Expenditure							
									
Te		es the family own fill the relevant d		Ye	es	No			
	yes kilidiy	ini the relevant u	etans.						
	Sr. No		ort Type cle/ Others)***	/Iake/ Model	Engi	ine Capacity (CC)	Registration No.	Owner Per	_
	1								
	2								
	3								
* C	Others: inclu	ude tractor, ricksha	w, bicycle, motor cy	cle rickshaw,	carria	ige pick, truck	etc.		
ı	Tave vou ex	ver got any other S	Scholarshins:	V	-c	No			
_	•		os & attach documen			_		_	
_									
	Sr. No	Name of Institute	Scholarship Name	Total Scholars Amou	ship	Total Scholars Period	hip Sc	s/Level at v holarship v granted	
	1								
	2								
	3								
	Нош ти	ich accietance is no	eded on semester bas	vic in terms of	f foo or	nd hostal abov	mas?		
•	HOW IIIU	ich assisiance is ne	eded on semester das	515 III (CIIIIS ()	i icc al	ia nosici chal	ges:		

UNDERTAKING

- 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 in correct / false after grant of financial assistance, the University will stop further assistance and the student will have to refund all payment received and or penalty equal to total scholarship amount.
- 2. NUTECH reserves the right to use information given in this form for verification and other purposes.
- 3. In case of any omission/ commission in providing incomplete/ false information, NUTECH reserves the right to take disciplinary action, which may result into cancellation of admission.
- 4. Should I be eligible, I authorize NUTECH to collect Zakat funds to pay for my fees and living expenses incurred during my entire undergraduate/ postgraduate program, as well as for other students along with administrative expenses of Zakat system.

Applicant Signature:	_ Parent/ Gua	rdian Signatı	ure:
Date:	Date:		
	FOR OFFICIAL US	E ONLY	
Are the applicant documents con	nplete and in order?	Yes	No 🗌
Is the applicant NUTECH Host e	lite?	Yes 🗌	No 🗌
Application Case Review Dates	(i)	(ii) _	
	Additional Rem	<u>arks</u>	
Dean of Undergraduate Edu	cation (DUE)		
 Date	 Department		Sign of DUE / Focal Person