



**Women University of Azad Jammu & Kashmir Bagh**  
HEC Need Based Scholarship Program 2022-23

Higher  
Education  
Commission



*Form Fee Deposited Rs.* \_\_\_\_\_ *Challan No.* \_\_\_\_\_ *Dated.* \_\_\_\_\_

**Name of the Department:** \_\_\_\_\_

**Degree Title / Program:** \_\_\_\_\_

"Paste  
Passport size  
Photograph  
here"

**1. Applicant's Name:** \_\_\_\_\_ **Gender:** Male  Female

**2. Applicant N.I.C No.**

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**3. Marital Status:** Single  Married  Divorced

**4. Age:** \_\_\_\_\_ **Domicile** \_\_\_\_\_

**5. Present Address** \_\_\_\_\_

**6. Permanent Address:** \_\_\_\_\_

**7. Are you currently working:** Yes  No

**8. If answer is Yes to Section No. 8 complete the sections (9-10)**

**Designation:** \_\_\_\_\_ **Name of Employer / Company:** \_\_\_\_\_

**9. Total Monthly Applicant Gross Income in Pak Rs.** \_\_\_\_\_

**10. Total Monthly Applicant Take Home Income\* in Pak Rs.** \_\_\_\_\_

\* Take Home Income: Salary / Pay available after deduction of taxes, provident fund charges etc.

**11. Tel (Res.):** \_\_\_\_\_ **Mobile:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**12. Total Family Members currently living with you:** \_\_\_\_\_

S #	Name of Family Member (s)	Relationship	Marital Status	Remarks**
1				
2				
3				
4				
5				
6				

**13. Detail of Family Members Earning (Take extra sheet if required):**

S #	Family Member Name	Relationship	Family Member occupation (Specify)	Organization Name	Designation	Monthly Gross Pay/Earning	Remarks
1							
2							
3							
4							
<b>14</b>	<b>Total Monthly Family Income (add Self Income, if applicable) Pak Rupees</b>						



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**15. Self/Brothers/Sisters/Children/Family Members Studying \_\_\_\_\_**

S #	Name	Relation with applicant	Name & Address of Institute	Class / Level	Fee per Month
1		Self			
2					
3					
4					
5					
6					
<b>15A</b>	<b>Total Fees &amp; Tuition Charges</b>				

**16. Father's/Guardian Detail:**

S#	Father	Guardian (if father is Deceased/not earning)
17	Name	Name
18	N.I.C. No.	Relationship
19	Status: Alive or Deceased	N.I.C. No.
20	Professional status Employed/Retired/Business Owner	Professional status Employed/Retired/Business Owner
21	Name of Company/Employer	Name of Company/Employer
22	Tel No. (Office)	Mobile No.
23	Mobile No.	Occupation Type & NTN
24	Occupation Type & NTN	Designation & Grade (BPS/SPS/PTC etc)
25	Designation & Grade (BPS/SPS/PTC etc)	Gross Monthly Income
26	Gross Monthly Income	Total Net Monthly Take Home Income (Salary/Pension/Others)
26A	Total Net Monthly Take Home Income (Salary/Pension/Others)	Monthly Financial Support available to applicant in Pak Rs.

**27. Asset Income (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)						
<b>27A</b>	<b>Total</b>						



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**28. Total Family Monthly Income**

S #	Family Member Name	Relationship	Monthly Income from Assets	Monthly Gross Pay/Earning	Monthly Net (Take home) Pay/Earning
1					
2					
3					
4					
5	Applicant Monthly Gross Pay/Earning				
6	Applicant Monthly Net (Take home) Pay				
<b>28-A</b>	<b>Total Monthly Income in Pak Rupees</b>				
<b>28-B</b>	<b>Total Annual Income in Pak Rupees</b>				

**29. FAMILY EXPENDITURES**

**29A. Accommodation Expenditures**

Type: Bungalow  Apartment/Flat  Town House  Village House

Accommodation Structure Type: Pucca House  Semi Pucca House  Kutcha House

Status: Rented  Self or Family owned  Employer/Govt Owned

Rent Payment: Self  Employer/Govt  Others

House Plot Size in Sq. ft. \_\_\_\_\_ Covered Area in Sq. ft. \_\_\_\_\_

S #	Accommodation Location/Address	Number of Bed Rooms		Number of Air conditioners		Accommodation Monthly Rent If (applicable)	Accommodation Annual Rent
		1-2	<input type="checkbox"/>	1-2	<input type="checkbox"/>		
		2-4	<input type="checkbox"/>	2-4	<input type="checkbox"/>		
		4-6	<input type="checkbox"/>	4-6	<input type="checkbox"/>		
		Above 6	<input type="checkbox"/>	Above 6	<input type="checkbox"/>		
<b>29B</b>	<b>Total Accommodation Rental Expenditure</b>						

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



**30. Utilities Expenditures**

Last Month Utilities Paid			
Telephone/Mobile	Electricity	Gas	Water

Note: Attached Paid Bills.

**31. Medical Expenditures:** Average of last six months (Per Month Expenditure) \_\_\_\_\_

**Total Family Expenditures**

S #	Education Expenditure	Accommodation Expenditure	Utilities Expenditure	Medical Expenditure	Food Expenditure	Misc. Expenditures	Total Monthly Expenditure	Total Annual Expenditure
<b>32</b>								

S #	Description	Amount in Pak Rupees
(Sec.28A)	Total Monthly Income	
(Sec.32)	Total Monthly Expenditure	
<b>33</b> (28.A-32.A)	Net Monthly Saving/Deficit*	

S #	Description	Amount in Pak Rupees
(Sec.28B)	Total Annual Income	
(Sec.32)	Total Annual Expenditure	
<b>34</b> (29.B-32.B)	Net Annual Saving/Deficit*	

\*If the monthly / Annual Saving/Deficit is negative, kindly explain the reasons for the gap, and the arrangements through which the differential gap is met by the family

Assets (with cost value)

**35. 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					

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



36. Number of Cattle(s) (with kind) \_\_\_\_\_

37. Area and location of Land(s)/Plot(s) owned \_\_\_\_\_

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

38. Assets worth (Cost 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)						
39.	Total						

40. Loan taken for Applicant Education

\* Family/ Friend Loan

(Specify details of loan taken and relationship with the relative / friend)

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41. Any source of financing other than loan (Please specify) \_\_\_\_\_

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42. How were the admission / first semester charges paid?

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43. Applicants educational record:

Level of Study	Name and Location of Institute	Per Month Fee	To- From month/ yr.	Division/ GPA/	%age / CGPA
Bachelors					
Intermediate					
Secondary					



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44. Name of the institution last attended \_\_\_\_\_

45. Have you ever got any other Scholarships: 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					

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

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46. Reference No. 01 (Not from blood relations)		47. Reference No. 02 (Not from blood relations)	
1. Name		1. Name	
2. Father Name		2. Father Name	
3. CNIC No.		3. CNIC No.	
4. Profession		4. Profession	
5. Contact No.		5. Contact No.	

**Note:**(Preferably from previous educational institutions/Elected Councilor or any member from civil society of the Area).



**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 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: Parents / Guardian Signature: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

**For Official use only**

Are the applicant documents in order?                      Yes                       No

Application Case Review Date (i) \_\_\_\_\_ (ii) \_\_\_\_\_

**Additional Remarks**

\_\_\_\_\_

**Date                      Department Name                      Signature Head of Department/ Focal Person**

**Documents Required for HEC Need Based Scholarship (NBS) and should be attached with the application form**

1. Passport size photograph
2. Copy of Student CNIC/Form-B
3. Copy of Mother, and father, CNIC
4. Copy of Sibling (Brother and Sister) Fee Receipt.
5. Copy of Medical Bills/ Expenditure related Documents (if any)
6. Copy of Rent Agreement (In Case Of Rented House)
7. House Picture (complete front view)
8. Copy of Electricity, Gas, Telephone / Mobile and Water Bill (Last Paid Bill)
9. Copy of Monthly Kitchen / Food Expenditure Bill
10. Copy of Father’s Death Certificate (In Deceased Case)
11. Salary Slip/Bank Statement/Income Certificate (Father/Guardian) Affidavit on Rs.50/- on the Stamp Paper duly attested by Oath Commissioner including two(2) Witnesses