

Women Medical College, Abbottabad

Scholarship Application Form

Deserving/Need Based

Instructions:

1. Please fill in BLOCK LETTERS
2. In case of non-applicable field, please write "NA".
3. Provide the required documents, mentioned on Pg. 4, for application processing.

Photograph

1. PERSONAL INFORMATION:

Name: _____

Father's Name: _____ Alive/Deceased _____

Guardian's Name (if different from father): _____

Relationship with Guardian: _____

Father/Guardian's Mobile #: _____

Present Mailing Address: _____

Residence Phone #: _____ Applicant's Mobile #: _____

Applicant's Email Address: _____

Applicant's Occupation: _____

In case of employment, Designation and Organization: _____

Salary per month: _____

2. Program Applied for Admission:

Application ID: _____

Degree Program Applied For: _____

Name of College: _____

Academic Qualifications

Level of Study	Institutions Name	From (Year)	To (Year)	Grade/Division	Percentage
Matriculation/ O-Levels					
Intermediate/A-Levels					
Entry Test					

Last Examination Passed	Class / Session	Total Marks	Obtained Marks	Grade/Division	Percentage	Position in College	Position in University

3. FAMILY INFORMATION

Particulars of Immediate Family Members * (use extra sheet in case of additional members)

Name	Age	Relationship to Applicant	Marital Status	Occupation	Institution/ Organization	Salary/Business Income/Pension per Annum
					Total Income (a)	

*Father, mother and siblings.

Other Sources of Income per Annum (Provide documentary evidence for each source of income)

Relation with Family Member	Profit from Saving/Investments	Rental Income	Agricultural Income	Others	Total Income
				Total Income (b)	

TOTAL INCOME (a+b) Rs:

Family Expenditures per Month *(Provide documentary evidence)*

Type of Expenditure	Last Month's Expense (Rs.)
Accommodation Expenditure (if rented)	
Utility Expenditure:	
• Electricity	
• Telephone	
• Mobile	
• Gas	
• Others	
Total	

Details of Property *(Provide documentary evidence)*

Asset Title	Exact Location	Area (In Acres/Sq. Yards)	Current Value (Rs.)
Bungalow / Apartment			
Land / Plot			
Commercial property			
Agricultural Land			
Vehicle			
Precious Assets (e.g. Gold)			
Cash & Bank Balance			
Any Other Asset			

4. OTHER INFORMATION:

Details of financial assistance/scholarship/stipend received in the last three years.

Degree Program	Academic Year	Type of Financial Assistance/Scholarship	Amount received	Sponsoring Agency

UNDERTAKING

I, _____, hereby state that the above information is true to the best of my knowledge and belief. I understand that any falsification of information may result in cancellation of the scholarship, admission. In such case, I shall be liable to refund the entire amount received under the scholarship program.

Signature of Father/Guardian

Date: _____

Signature of Candidate

Date: _____

DOCUMENTS TO BE SUBMITTED WITH THE FORM

- ☐ Copy of CNIC of:
 - Applicant
 - Mother
 - Father/Guardian
 - Copy of Application submitted
- ☐ *Copy of Salary Slip/pension book of Father/ Guardian and all other working family members*
- ☐ In case, Father / Guardian/ or any other family member is a non-salaried person i.e. Business man / Landlord etc., provide;
 - Bank Statement of last six (6) months of personal and business account.
 - Copy of Income Assessment / Return of Income duly issued by Income Tax Department, Government of Pakistan
- ☐ Copy of accommodation/house documents
- ☐ Copy of documentary evidences of investments/real estate/property owned by the family
- ☐ Death certificate (if / whenever applicable) of parents, siblings & spouse (if any)
- ☐ Any other Document to strengthen Case

***Note: Please submit the application form and the required documents in a file.
Incomplete application will not be considered for further processing.***