



# LAHORE LEADS UNIVERSITY

## (Need Based Scholarship Form) Fall 2012

Date \_\_\_\_\_

Serial # \_\_\_\_\_

### INSTRUCTIONS FOR FILLING THE FINANCIAL ASSISTANCE APPLICATION FORM:

- Read the application form carefully before filling.
- Fill in the form using black ball point pen and write in capital letters
- Submit duly completed application form to the (Financial Support Program Committee) office or the focal person.
- 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
- 20 % tuition fee off for out station students
- Check your application for spellings, grammatical errors and factual oversight
- Ensure that you have attached all the required documents by putting a tick mark in checklist
- Answer all questions. Those not applicable should be marked "N/A"

#### 1 Copies of computerized CNIC of

**Tick the relevant**

<b>Father</b>	<input type="checkbox"/>
<b>Mother</b>	<input type="checkbox"/>
<b>Guardian</b>	<input type="checkbox"/>

#### 2 Salary/Income Certificate of

<b>Father</b>	<input type="checkbox"/>
<b>Mother</b>	<input type="checkbox"/>
<b>Guardian</b>	<input type="checkbox"/>

#### 3 Copies of last three (03) month utility bills

<b>Electricity</b>	<input type="checkbox"/>
<b>Gas</b>	<input type="checkbox"/>
<b>Telephone</b>	<input type="checkbox"/>
<b>Water</b>	<input type="checkbox"/>

#### 4 Attested copy of rent agreement (if applicable)

Student Name: \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_

Father/Guardian CNIC No: \_\_\_\_\_

Program Title : \_\_\_\_\_



# LAHORE LEADS UNIVERSITY

### Timings

Morning

Evening

Weekend

### Marital Status

Single

Married

Applicant CNIC No: \_\_\_\_\_

Age : \_\_\_\_\_ Place of Birth \_\_\_\_\_

Are you currently working : Yes  No

### If answer is Yes

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

Previous Employer/Company Name (if applicable): \_\_\_\_\_

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

Tel (Res.): \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Brothers/Sisters/Children/Family Members studying \_\_\_\_\_

### Details of Siblings Studying

S # Name Relation with applicant Name & Address of Institute Fee per

Sr. No	Name	Relatino with applicant	Name & Address Institute	Fee per Month

### Remarks From Admission Office

Name/Signature \_\_\_\_\_

### Remarks From Director Admission

Director Admissions \_\_\_\_\_