LIAQUAT UNIVERSITY OF MEDICAL & HEALTH SCIENCES, JAMSHORO, SINDH, PAKISTAN. URL: www.lumhs.edu.pk, Email: smjatoi@hotmail.com Ph: +92-22-9213345, Fax: +92-22-9213346 ISO 9001:2008 Certified					No. LUMHS/ACD/- Dated: /00/2014				
Degree Title / Pr	Degree Title / Program:						Siz	issport ze otograj	ph
	Applica	Sectio nt Personal and		ormation	_				
1. Applicant	's Name:			Ger	der: N	Male		Fema	ale 🗌
2. University	Reg. No:								
3. Applicant N NIC No.	JADRA		-					-	
4. Marital Stat	us Single	Marrie	d D	Divorced					
5. Date of Birt	h:Age	e:	Nationa	ality					
Domicile(I	rth (Name of City, District Name):								
6. Present Add									
7. Permanent	Address:	Vec	No						
	Yes to Section No			(3)					
	n:	1		,					
-	nployer/Company								
11. Total Mont	hly Applicant Gro	ss Income in Pal	k Rs						
12. Total Mont	hly Applicant Tak	e Home Income	* in Pak Rs						
13. Total Annu	al Applicant Gross	s Income:	Applica	nt NTN No)				
* Take Ho	me Income: Salary	/ Pay available afte	er deduction of t	axes, provide	ent fund	charg	es etc.		
14. Tel (Res.):		Mobile:		Ema	il:				
15. Total Mem	pers in the Family	:							
16. Total Famil	y Members curren	ntly living with	you: Total:	Male:	F	emal	e:		
17. Total Num	ber of Brothers/Si	sters married To	tal:	Brothe	rs	Sis	sters		
S # Name of Fai	nily Member (s)	Relationship	Marital Stat	us	Ren	narks	**		
1									
2									
3									

4		
5		
6		
7		

**Remarks: List down the number of dependents supported by married brother(s)/ sister(s)
18. Brothers/Sisters/Children/Family Members studying ______

Details of Siblings Studying including the applicant own detail

S #	Name	Relation with applicant	Name & Address of Institute	Fee per month	Tuition per month (If applicable)
1					
2					
3					
4					
5					
6					
22	Total Fees & T				

19. Fath e r 's Na me: Computerized N.I.C. No						
20. Father Status: Alive Deceased (if deceased please mentioned the date of						
demise (dd-mm-yy))						
21. Professional status: Employed Retired						
If answer is Employed complete the sections (22-30) else from (27-30)						
22. Name of Company/Employer:						
23. Address:						
24. Tel (Off):Mobile:						
25. Occupation :						
26. Designation & Grade (BPS/SPS/PTC etc):						
27. Total Gross Monthly Income (Salary/ Pension/ Others):						
28. Total Net Monthly Take Home Income (Salary/ Pension/ Others):						
29. Previous Occupation (if applicable):						
30. Total Annual Income:NTN						

[Add
from
from
from
from al

* For sources with annual income returns, kindly report the monthly income earned

42. Total Earning Members in Family:

43. Total No of family members not earning ______

44. Details of Family Members Earning:

S #	Family Member Name	Relationship	Family Member occupation ***	Organization Name	Designation	Monthly Gross Pay/Earning	**Remarks
1							
2							
3							
4							
44	Total Monthly Rupees						

** Please mentioned if the Family member supporting to Family in Remarks Column (Yes/No)

*** 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). Details/nature of self business need to filled in at remarks column
- 5. Others. Details/nature of self business need to filled in at remarks column

46. Total Family Monthly Income

			Monthly Income	Monthly Gross	Monthly Net
S #	Family Member Name	Relationship	from Assets	Pay/Earning	(Take home)
			(Sec. 45)		Pay/Earning
1					
2					
3					
4					
5	Applicant Monthly Gross	Pay/Earning			
	(Sec. 11)				
6	Applicant Monthly Net (T	Take home)			
	Pay/Earning (Sec. 12)				
46-A	Total Monthly Income in Pak Rupees				
46-B	Total Annual Income	in Pak Rupees			

FAMILY EXPENDITURES

7. Accommodation Expenditures (Please Check the relevant boxes)							
Type: Bungalow Apartment /Flat	Town House Village House						
Structure: Pucca House Kutcha House	Semi Pucca House Others (Detail						
available at Page 1 &2)							
Status: Rented Self or Family	owned Employer / Govt Owned						
Rent Payment: Self Employ	ver/Govt Others						
Total Size of the House in Sq. ft.	Covered Area in Sq. ft						

S #	Accommodation Location /Address	Number Of Bed Rooms	Number Of Air conditioners	Accommodation Monthly Rent	Accommodation Annual Rent
		1-2 2-4 4-6 6-8 Above 8	Nill 1-2 3-6 6-8 Above 8		
48	Total Accommodation I	Rental Expenditure			

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

size)_____

49. Utilities Expenditures

Last Month Utilities Paid						
TelephoneElectricityGasWater						

Average of Last Six Months (Per Month Utilities Charges)								
S # Telephone Electricity Gas Water Total								
49								

50. Monthly Food /Kitchen Expenditures _____

51. Medical Expenditures: Average of last six months (Per Month Expenditure)

52. Travelling/ Miscellaneous Expenditures

Average of last six months (Per Month Expenditure)____

Total Family Expenditures

S #	Education	Accommodation	Utilities	Food	Medical	Misc.	Total Monthly	Total Annual
	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure
	(Sec. 22)	(Sec. 48)	(Sec. 49)	(Sec. 50)	(Sec. 51)	(Sec. 52)	(52.A)	(52.B)
52								

S #	Description	Amounts in Pak Rupees
(Sec.46-A)	Total Monthly Income	
(Sec. 52-A)	Total Monthly Expenditure	
53-A (46.A - 52.A)	Net Monthly Disposable Income*	

S #	Description	Amounts in Pak Rupees
(Sec.46-B)	Total Annual Income	
(Sec. 52-B)	Total Annual Expenditure	
52-B (46.B - 52.B)	Net Annual Disposable Income*	

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

Section B:

Cumulative information of Self, Parents and Guardian Assets

Assets (with current market value)

53. 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					
3					
4					

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

54. Number of Cattle(s) (with kind)

55. 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					

56. Assets worth (Current Market 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)						
56	Total						

57. Taxes paid (per annum in Pak. Rs)_____

Section C: Financial arrangements for current year

58. Funds Availability for Applicant Education (per annum in Pak Rupees)

S #	Income Source	Father	Mother	Spouse	Self	Other	Total
1	Salary / Earnings						
2	Family / Friend Advances						
	& Loan *						
3	Bank Loan						
4	Other (Specify)						
58	Total						

* Family/ Friend Loan (Specify relationship with the relative / friend)

59. Any source of financing other then this scholarship (Please specify)

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

Section D: Applicant Educational Record

Level of Study	Name of the Institute	*Address of the Institute	Period(Sta rt & End Date)	Per Month Fee	Division/ GPA/ Grade
Bachelors					
Intermediate					
Higher					
Secondary					
Secondary					
Primary					

* At least the name of the City is required in the field.

61. Have you ever awarded any other scholarship before: 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					
3					

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

UNDERTAKING

- 1. The information given in this application is 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:	Date:
Date: Parents / Guardian Signature _	 Applicant Signature:

For Official use only

Are the applicant documents in order?
Yes

🗌 No

The notices furnished to the applicant for furnishing of required documentation

S #	Notice Date	Document Name Missing	Document Submission Date	Remarks		
1						
2						
3						
4						
Application Case Review Dates (i)(ii)						

Additional Remarks

Date

Evaluation Sheet Completion Guidelines

- 1. Sno
- 2. Name of the candidate as appeared on the Applicant Form
- 3. Father's Name of the candidate
- 4. The program in which the candidate is enrolled
- 5. New Nadra ID Card No. in case of non availability pleased mentioned B form No
- 6. Name of the last institution where candidate was studying
- 7. Per Month fee of the last institution attended by the candidate
- 8. Marital status of the candidate : Single/Married
- 9. Father status Alive/Deceased
- 10. Profession of the father / Guardian
- 11. No. of family member(s) who are not earning
- 12. Number of family member(s) studying
- 13. No of family member(s) who are earning
- 14. per net month (take home) Income of Father/guardian (Salary/Pension/Business Income etc)
- 15. per month Income of Mother (Salary/Pension/Business Income etc)
- 16. Income from land
- 17. Income from other sources like defense saving certificate, shares and other government securities
- 18. Total of monthly income
- 19. Total Annual Income
- 20. Average per month Gas bill (put average of last six month)
- 21. Average per month Electricity bill (put average of last six month)
- 22. Average per month Telephone bill (put average of last six month)
- 23. Average per month water bill (put average of last six month)
- 24. Total of per month Utility bills

25. Per month education expense mentioning cumulative family education expenditure and applicant education expenses

- 26. Per month food/kitchen expenses
- 27. Per month Medical expenditure of the family
- 28. Other Misc Expenditure. Mention any liabilities like loan payments, lease rentals etc.
- 29. Total expenditure of the family on monthly basis
- 30. Annual Expenditure of the family

31. Monthly Disposable Family Income (Difference of Take Home family income and monthly net expenditures)

32. Total number of vehicles owned by the family (car / motor cycle)

- 33. Type of the vehicle (car / motorcycle)
- 34. Make & model of the vehicle

- 35. Vehicle Engine Capacity in Cubic Centimeter
- 36. mentioned the size of the land/plot
- 37. Current market value of the land/plots
- 38. Accommodation (Rented/Owned)
- 39. Type of Accommodation (Town House, Flat, etc.)
- 40. Market value of the house
- 41. Current Bank Balance
- 42. Value of Prize bond/shares, defense saving certificates
- 43. Other Misc Assets
- 44. Total Assets value
- 45. Mentioned any other important information in Remarks Column. The remarks should specify the reasons for selection and non selection of a candidadte.