



Shaheed Benazir Bhutto
University of Veterinary and Animal Sciences Sakrand
Students Financial Aid Office

Need-cum-Merit Based Scholarships

(Under Zakat and Ushr Department Government of Sindh)

| Details of Applicant | |
|----------------------|-----------------------|
| Name | _____ |
| CNIC # | _____ - _____ - _____ |
| Class | _____ Seat # _____ |
| Department | _____ |
| Mobile # | _____ - _____ - _____ |
| E-mail | _____ |

| Details of Father OR Mother (In case father is not alive) | |
|---|-----------------------|
| Occupation: | _____ Age: _____ |
| Monthly Income: | _____ |
| Mobile # | _____ - _____ - _____ |

Mailing Address: _____

| Family details (Numbers only) | Total Family Members | Parents / Guardian | Brothers | Sisters | School Going | Non School Going | College & University Going |
|----------------------------------|-------------------------|-----------------------|----------|---------|--------------|---------------------|-------------------------------|
| | | | | | | | |

| Detail of Income in Pak. Rupee | | | | | |
|--------------------------------|--------|--------|----------|---------|----------|
| Sources | Father | Mother | Brothers | Sisters | Guardian |
| Salary | | | | | |
| Pension | | | | | |
| Property Rent | | | | | |
| Agriculture | | | | | |
| Business | | | | | |
| Others | | | | | |
| Total Income | | | | | |

| Detail of Expenditures | | | | | | |
|------------------------|-----------|------------|--------------|-----------|-----------|-----------|
| Electricity Bills | Gas Bills | Tel. Bills | Mobile Cards | Education | Groceries | Transport |
| | | | | | | |

| Academic Performance | | | | | | | | |
|----------------------|--|---|--------------|--|---|------------|--|---|
| Matriculation | | % | Intermediate | | % | Graduation | | % |
| | | | | | | | | |

Whether granted any scholarship, freeship, financial assistance last year. If so give details: _____

Undertaking

I, the applicant, hereby undertake that above information is correct to the best of my knowledge. I am fully conversant that false information may lead to disciplinary action against me under UoK rules.

Dated: _____

Signature of Applicant



**GOVERNMENT OF SINDH
ZAKAT & USHR DEPARTMENT**

CERTIFICATE NO. _____

DATED. _____

ISTEHQAQ CERTIFICATE

It is certified that Mr. / Mrs. _____ S/o D/o
_____ holder of CNIC No. _____ is a permanent resident of

(Address of beneficiary)

2. He / She is poor person and has no source of income to meet the expenditure on Higher Education.
3. His / Her Istehqaq for Need-Cum-Merit Basis Scholarship is therefore endorsed.

Stamp/official seal of
Authorized person.

Signature _____

Name of Authorized person _____

District Zakat & Ushr Committee _____

CERTIFICATE FROM FATHER/GUARDIAN

I solemnly affirm that the statement given by my son/daughter is correct. Further, I am fully conversant that false documents/data may lead to disciplinary action, as per University rules.

Date: _____

SIGNATURE OF FATHER/GUARDIAN

NO APPLICATION WILL BE ENTERTAINED WITHOUT THE FOLLOWING DOCUMENTS

1. Father's / Guardian's Income Certificate / Pay Slip from the employer **OR** Copy of Tenancy Agreement, in case source of earning is from house rent etc., failing which, application shall not be considered.
2. Attested Photocopies of Marks Certificates (Matriculation, Intermediate and Graduation), Marks Proforma of the last university examinations passed.
3. Copy of recent Medical bills (if applicable)
4. Photocopies of CNIC of parents / guardian & applicant.
5. Photocopy of University ID Card.
6. 'B' Form or other document certifying number of brothers/sisters.
7. Photocopy of recent/latest utilities bills (Electricity, Gas, Water and Telephone).
8. Copy of Fee Vouchers (paid) against tuition/school/semester fee of self and siblings.
- 9. ISTEHQAQ CERTIFICATE (on form page-2) duly signed and stamped by authorized person of District Zakat & Ushr Committee of the concerned DC Office.**

Note:

1. Incomplete forms or forms without supporting documents shall not be considered.
2. Students aged above 18 years must enclose a copy of their CNIC's otherwise their forms may not be considered.

PART-II

To be filled in by the MERIT Scholarship Committee of the Educational Institution

The Committee in its meeting held on _____
considered the application and found Mr. / Ms
S/O / D/O eligible for MERIT Scholarship for the year.

Chairman of Department /Institute

Member DZ&UC

Secretary

Focal Person