

FOUNDATION UNIVERSITY ISLAMABAD
FINANCIAL ASSISTANCE APPLICATION FORM

RAWALPINDI CAMPUS

ISLAMABAD CAMPUS

- Financial assistance is not binding on the FUI Campuses and is based on assessment of need and merit as well as availability of funds with the Campus.
- Decisions are based on the information provided in this form and investigation/ verification through sources/means.
- Candidates will be required to appear for interview to provide additional information/ confirmation.
- The FUI Campuses referred in this document is the campus of FUI (Foundation University Islamabad) in which the student is studying.
- The financial assistance is towards the tuition fee only and the FAP campus committee will determine extend of assistance to be given if any.

SECTION A: Personal and Family Information

Applicant's Particulars

1. Applicant's Name/Address: _____

_____ Tel No. _____

2. Registration No _____ Program/Semester/Year _____

3. Last Class/Semester/Year Result (GPA/CGPA/%age): _____

4. Marital Status

Single

Married

Divorced

5. Occupation (Give Full Details if applicable) _____

a. Designation _____

b. Name of
Company/Employer _____

Tel: Off: _____ Fax: _____ Email _____

c. Monthly Income Gross _____ Pension (If Retired) _____

6. Previous Occupation (If applicable) _____

7. Details of any travels abroad in the last five years: (Including Hajj and Umra) _____

Are you expecting or getting funding for your education at the institute/college from any other source other than mentioned above.

Yes

No

If yes, please specify the source and amount

Source _____

Amount (In Rupees) Given _____ Expected _____ Not Known _____

Father/Guardian's Particulars

1. Father/Guardian Name/Address (in capital) _____

2. Occupation (give full details) _____
3. Tel No. _____ Fax _____ Email _____
4. Monthly Income Gross: _____ Pension (If Retired) _____
5. Emoluments: (If re-employed) _____ Previous Occupation (If applicable) _____
6. Details of any travels abroad in the last five years: (Including Hajj and Umra) _____

7. Spouse's Name (in capital) _____

Mother's Particulars

1. Mother's Name/Address _____

2. Tel No. _____ Fax _____ Email _____
3. Monthly Income Gross: _____ Pension (If Retired) _____
4. Occupation (give full details) _____
5. Details of any travels abroad in the last five years: (Including Hajj and Umra) _____

6. Spouse's Name (in capital) _____

Detail of Family Members (Brother/sister/children) and dependents

Candidate's Family

Name	NIC No.	Age/ Yrs.	Occupation (if any)	Income & Source (Per month)	Institution (if studying)	Fee (Per month) if Studying

Guardian's Family

Name	NIC No.	Age/Yrs.	Occupation	Income & Source (Per month)	Institution (if studying)	Fee (Per month)

Section B: Financial Information (Attach Documentary Evidence)

1. Family Monthly Income Detail:

	Father/Guardian	Mother	Spouse	Self	Other Sources/Misc	Total Monthly Income	Total Annual Income
Salary							
Income from Rent							
Income from Land							
Others (Specify)							

2. Utilities/Expenditures:

Utilities Paid				
(Average of last six months)				
Telephone	Electricity	Gas	Water	Total

3. **Monthly Food /Kitchen Expenditures** _____

4. **Medical Expenditures:** Average of last six months (Per Month Expenditure) _____

5. **Travelling/ Miscellaneous Expenditures**

Average of last six months (Per Month Expenditures) _____

Section C: Expenditures on Education

1. Candidate's fee structure for the current Academic Semester/Year

Tuition Fee _____

Examination Fee _____

Other dues: _____

Total (Semester/Year dues) _____

2. Family Expenditures on Education

Average of last six months (Per Month Expenditures) _____

SETION D: Detail of Current Assets

1. Home owned by the family

Yes

No

2. If owned, area of plot: _____ Locality of House/General Area/Mohallah etc

3. Any other house, flat or property owned by the family.

Yes

No

If yes give details regarding location, size rent etc. on a separate sheet

4. If living on rented house, what is the rent per month (attach copy of agreement)

5. Number of Air conditioner: _____ Number of cars owned by family (with make and model) _____

6. Agriculture land owned by the family Locality/Size etc _____

(Current Value of Assets in Pak Rupees)

	Father/ Guardian	Mother	Spouse	Self	Brother/ Sister/ Children	Total Rs.
House						
Business						
Land and Building						
Bank Balance						
Stocks/Bonds						
Cars/Vehicles						
Others						
Total Assets						

Supporting Documents Attached (Yes/No).

(To be used by the Campuses)

Income	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>
Rent Agreement	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>
Death Certificate	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>
Electricity Bill	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>

Gas Bill	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>
Water	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>
Telephone Bill	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>

DECLARATION AND UNDERTAKING BY THE STUDENT:

I solemnly and sincerely declare/undertaking that:

1. All the above information provided by me, particularly the details given in the Admission Form and this (Financial Assistance Form) are true, accurate and correct in every respect to the best of my knowledge.
2. No information or detail has been withheld, misrepresented and nothing has been concealed in any manner whatsoever. In case of 25% (or more) change in my financial circumstances, I shall inform my campus at regular and responsible interval.
3. I shall abide by the rules and regulations of my campus including financial assistance policy, which may be modified from time to time by FUI.
4. I understand that at my stage of the program, my admission including financial assistance may be cancelled by the campus due to the concealment/ withholding of facts, misrepresentation and withholding of information by me.
5. In case of cancellation of my admission resulting from Para 4, any financial assistance or other benefit taken/used by me will become immediately payable/refundable to FUI.
6. I fully understand that FUI reserves the right and the prerogative to initiate civil as well as pecuniary proceedings with regard to the above in respect of obtaining pecuniary advantage.

Student's Signature _____ Date: _____

DECLARATION AND UNDERTAKING BY THE PARENT/GUARDIAN

I, THE PARENT/GUARDIAN OF Mr. Ms. _____ do solemnly declare/undertake that:

1. I have read all the information provided by him/her to FUI particularly the details given in this form and declare that the information and details contained there in are true, accurate and correct in every respect to the best of my knowledge.
2. No information or detail has been withheld, misrepresented and nothing has been concealed in any manner whatever, In case of 25% (or more) change in my or the student's financial standing, I shall inform the FUI Campuses immediately on occurrence
3. My son/daughter/ward shall abide by the rules and regulations of FUI including financial assistance policy, which may be modified from time to time by FUI.

4. I understand that at my stage of the program, his/her admission including financial assistance may be cancelled by the FUI, due to the concealment/withholding of facts, misrepresentation and withholding of information by me or the student.

5. In case of cancellation of admission of my son/daughter/ward resulting from Para 4, any financial assistance or other benefit taken/used by me will become immediately payable/refundable to FUI.

6. I fully understand that FUI reserves the right and the prerogative to initiate civil as well as criminal proceedings with regard to obtaining and pecuniary advantage (as explained/listed above).

Parent/guardian's Signature: _____ Date _____

Reference:

Relative: _____

Neighbour _____

Government Official/ex serviceman _____

Fauji Foundation employee of officer grade _____

WARNING

- **If the entire required documents are not enclosed, the application for financial assistance will be rejected.**
- **In case of providing false information, admission of the candidate will be cancelled.**
- **Incomplete information will result in disqualification of the candidate for financial assistance.**

FOR OFFICE USE ONLY

FAP Campus Committee Recommendations/Comments

Application Review Dates:

Members:

<u>Name</u>	<u>Signature</u>
1.	
2.	
3.	
4.	
5.	<u>Secretary FAP Campus Committee</u>

Recommendations by the Chairman

Director, Campus

Note: Part A, B,C, D and E must be filled.

Part A

Personal Information						
Name of The Candidate	Father,s Name	Cat	Discipline/ Program	Batch/ Semester	CGPA/ Marks	Amount of other scholarship being availed
			MBBS			

Part-B

Family Status						
Marital Status	Father Status	Parents Guardian Profession	Total No of Dependent Family Member	Family Members Studying	Earning Hands	Father /Guardian Income

Part-C

Mother Income	Income From Land	Misc. Income (Pension)	Total Monthly Income	Total Annual Income

Part-D

Monthly Expenditure (Avg.of Last 6 Month)

Gas	Electricity	Phone	Water	Sub Total	Family Exp on Education	Candidate Edu Exp per month	Food Exp	Medical	Misc.	Total Monthly Exp	Annual Exp	Disposable Montly Income

Part-E

Fixed Assets

Current Assets

No of Vehicles	Vehicle Type	Model of Vehicle	Vehicle Engine Capacity	Size of Land	Value of Land	Accommodation & Location	Type of Accommodation and Size	Value of Home	Bank Balance	Stock/Prize Bond	Miscellaneous	Total Assets

FINANCIAL POSITION

1. Father/Guardian Current Occupation _____

2. Monthly Income:

	Father/Guardian	Mother	Self	Brother/ Sister	Total Monthly Income
Salary					
Income from Rent					
Income from Land					
Other (Specify)					
Total					

3. Family Current Assests

	Father/Guardian	Mother	Spouse	Self	Brother/ Sister	Total (Rs)
House						
Business						
Land & Buildings						
Car/Vehicles						
Bank Balance						
Total Assest						
Total						

4. Detail of Dependents of Father/Guardian

:

Name	Relation	Age	Institution (if studying)	Fee (per month) if studying

5. Monthly Expenditure

- a. Approx exps on House hold/
Utilities: Rs _____
- b. Approx Medical Exps : Rs _____
- c. Approx Education Exps : RS _____
- d. Approx Travel/Misc Exps : Rs _____
- Total : Rs _____