UNIVERSITY OF VETERINARY AND ANIMAL SCIENCES, LAHORE

(UA&FA)

No.UA&FA/FA/6528

Dated:09-01-2023

NOTICE

Applications are invited from the undergraduate students (1st year morning only) of the following degree programs for the award of <u>HEC Need Based Scholarship</u> for the academic session 2022-23 on the prescribed application form (Available from the photocopy shop of the university).

- i) DVM
- ii) Pharm.D
- iii) All BS(Hons) Degree Program

All the concerned students are further informed that the application form must be accompanying the following attested documents for the award of said scholarship.

- 1. Copies of computerized CNIC (Father, Mother, Guardian)
- 2. Salary certificate / Income certificate (attested by the Patwari, Numberdar, Chairman, Naib Chairman or Secretary of the Union Council).
- 3. Copies of last month utility bills (Water, Gas, Electricity and Telephone).
- 4. Death Certificate (in case of orphan.)
- 5. Attested copy of rent agreement (if applicable)
- 6. Copies of last & latest fee receipts of self and siblings
- 7. Copies of medical bill/expenditure related documents (if applicable)
- 8. Statement of purpose.
- 9. Two Passport size photographs of applicant.
- 10. House pictures (must be cleared)

INELIGIBILITY

- a) Those students whose family income is more than 45,000/- from all sources are not eligible for said scholarship.
- b) In case of any misstatement / false information on the prescribed application by the applicant, his / her admission will be cancelled.

Applications completed in all respect should be reached in the Financial Aid Office upto <u>03-02-2023</u> positively.

In case of any query, please contact to the undersigned.

(QAISAR HUSSAIN)
Asstt. Director, Financial Aid



Nar	ne of the Univ	ersity:							
Deg	ree Title / Prog	gram:			Semes	ster			
Reg	istration No:_		Morning/Evening						
	1. Applicant'	s Name:			Gender	: Male	Female		
	Applicant N NIC No.	NADRA		-			-		
	3. Marital Status Single Married Divorced								
	4. Age : Domicile								
	5. Present Ado								
	6. Permanent								
	7. Are you cui	rrently working:	: Yes	No					
	8. If answer is	Yes to Section I	No. 8 complete	the sections (9-1	10)				
	Designatio	n:	Nam	e of Employer /	Company:				
	9. Total Mont	hly Applicant Gr	oss Income in F	Pak Rs					
	10. Total Mont	hly Applicant Ta	ke Home Incom	ne* in Pak Rs					
	* Take Ho	me Income: Sala	ry / Pay available a	fter deduction of ta	axes, provident fu	and charges etc.			
	11. Tel (Res.):		Mobile:		Email:				
		y Members curr							
S #		mily Member (s)				Remarks**			
1			,						
2									
3									
4									
5									
6									
	13. Details of F	Family Members	Earning (Take e	extra sheet if req	quired):				
S	Family		Family Member	Organization		Monthly			
#	Member Name	Relationship	occupation	Name	Designation	Gross	Remarks		
1			(Specify)			Pay/Earning			
1									
2									
3									
4									
14	Total Monthly	Family Income	(add self incom	e, if applicable)	Pak Rupees				



15. Brothers/Sisters/Children/Famil	y Members studying	
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		Relation			<i>U</i>			
S #	Name	with applicant	N	Vame & Add	ress of Insti	tute	Fee per	month
1	1							
2								
3								
4								
5								
6								
15A	Total Fees & T	Tuition Charge	es					
16	. Father's Nan	ne:		_ Computeri	zed N.I.C. N	No		
17.	Status: Alive	De	eceased					
18.	Professional st	atus: Employ	ved I	Retired	Busines	s Owner [
19.	Name of Comp	pany/Employe	er:					
20	. Tel (Off):			N	Iobile:			
21	. Occupation T	ype:		NT	N			
22	. Designation &	ck Grade (BPS	S/ SPS/PTO	C etc):	Gross	Monthly In	ncome:	
23	. Total Net Mor	nthly Take Ho	me Incom	e (Salary/ Po	ension/ Othe	ers):		
24	.Any Other Sup	pporting Perso	on (Mother	/ Guardian/	Brother/ Sis	ster/Family	Relative/G	uardian):
25	. Name:			I	Relationship):		
26	. Occupation ar	nd Designatio	n					
27	. Monthly Fina	ncial Support	Available	to Applicant	in Pak Rs.			
	. Asset Income	(on monthly	basis)	1				
S #	Income S	Source	Father	Mother	Spouse	Self	Other	Total
1	Property Ren	t						
2	Land Lease							
3	Bank Deposit	ts*						
4	Shares / Secu	ırities*						
5	Other (Specif	fy)						
284	Total							



29. Total Family Monthly Income

C 11	Escal Mondon None	D.1.4	Monthly Incor		Monthly Net
S #	Family Member Name	Relationship	from Assets	Pay/Earning	(Take home)
1					Pay/Earning
1					
2					
3					
4					
5	Applicant Monthly Gros	s Pay/Earning			
6	Applicant Monthly Net	Take home) Pay			
29-A	Total Monthly Incor	ne in Pak Rupeo	es		
29-B	Total Annual Income	e in Pak Rupees	3		
3(FAMILY EXPENDI	TURES		•	
30	A. Accommodation E	xpenditures			
	Type: Bungalow	Apa	artment /Flat	Town House	Village House
	Status: Rented	Self	or Family owned	Employ	yer / Govt Owned
	Rent Payment: S	Self	Employer/Govt	t 🔲	Others
	House Plot Size in	n Sq. ft		vered Area in Sq. ft	
			Number Of		
S #	Accommodation	Number Of	Air	Accommodation	Accommodation
	Location /Address	Bed Rooms	conditioners	Monthly Rent	Annual Rent
		1-2	1-2		
		2-4	2-4		
		4-6	4-6		
		Above 6	Above 6		
30B	Total Accommodation R	ental Expenditur	e		
	Any other house/	flat owned by the	ne Parents/Guardi	an (if yes please spec	ify with location

and size)_____



Last Month Utilities Paid						
Telephone Electricity Gas Water						

32.	Medica	l Ex	penditures:	Average	of last	six m	onths (Per	Month	Expe	enditure))

Total Family Expenditures

	Education	Accommodation	Utilities	Medical	Misc.	Total Monthly	Total Annual
S #	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure	Expenditure
	_		_	_			_
33							

S #	Description	Amounts in Pak Rupees
(Sec.29A)	Total Monthly Income	
(Sec. 33)	Total Monthly Expenditure	
34	Net Monthly Disposable Income*	
(29.A - 33A)	The Honding Disposable means	

S #	Description	Amounts in Pak Rupees
(Sec.29B)	Total Annual Income	
(Sec. 33)	Total Annual Expenditure	
35 (29.B – 33.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				
Assets (with current market value)				
36. Does the family own any Transport? Yes No				

36. 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					



Higher
Education
Commission

Assets Title	Qty	Size	Location (Address)	Cultivable Area	Agricultural Yield per			
38. Area and location of Land(s)/Plot(s) owned								
37. Number of Cattle(s	37. Number of Cattle(s) (with kind)							
* Others: include tractor, rickshaw, bi-cycle, motorcycle rickshaw, carriage pick, truck etc.								
Commission								

Assets Title	Qty	Size	Location (Address)	Cultivable Area	Agricultural Yield per Acre
Residential					
Commercial					
Agricultural					
Employer/Govt Scheme					

39. 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)						
40.	Total						

* Family/ Friend Loan
(Specify details of loan taken and relationship with the relative / friend)
42. A my course of financing other than loon (Dlaces are offs)
42. Any source of financing other than loan (Please specify)
43. How were the admission /first semester charges paid?
13. 110 w were the damission / mst semester charges para.

44. Applicants educational record:

Level of Study	Name and Location of Institute	Per Month Fee	To- From month/ yr.	Division/ GPA/	%age / CGPA
Bachelors					
Intermediate					



The same									
Sec	condary								
45	. Per month fee/ tuitio	on charges of the i	institution last a	ttended					
46	6. Have you ever got a	ny other Scholars	ships: Yes	_ No	_				
(If ye	es fill the details of scho	olarships & attach	documentary pro	of of the scholars	ships)				
S#	Name of Institute	Scholarship Name	Total Scholarship Amount	Total Scholarship Period	Class / Level at which Scholarship was granted				
1									
2									
State	ment of Purpose (Exp	lain your suitabilit	y for this scholar	ship) - attach sepa	arate sheet if required				
	• • •			17	1				
UND	ERTAKING								
1. Th	ne information given in thi	s application are true	to the best of my k	knowledge and I und	lerstand that any incorrect				
inf	formation will result in the	e cancellation of this	application. If any	information given in	n this application is found				
inc	correct or false after grant o	of financial assistance,	the institute will sto	p further assistance a	and the student will have to				
ref	fund all payment received a	and or penalty equal to	total scholarship am	nount.					
2. HI	EC reserves the right to use	information given in t	his form for verifica	tion and other purpo	ses.				
Date: F	Parents / Guardian Signature	e	Applicant Si	gnature:					
For C	Official use only								
	ne applicant documents	s in order? Yes	s	No					
Annli	cation Case Review Da	ates (i)	(ii)						
		utes (1)	(11)						
Additional Remarks									
Date	Del	partment Name	Signat	ture Head of Department	artment / Focal Person				