

# Financial Aid Application For the Year 2019 -20

## This application covers the following sections:

- Section A: Student Information
- Section B: Family Members' Information
- Section C: Educational Information
- Section D: Household Income and Sources
- Section E: Assets Owned
- Section F: Household Expenses
- Section G: Expected Contribution
- Section H: Additional Explanations
- Section I: Undertaking

## Instructions

Answer all questions.

If a question does not apply to you please do not leave the answer field blank, instead write N/A for those questions.

Please enter currency amounts in PKR. If you are entering figures after conversion from a foreign currency, use the official exchange rate at the time of application.

Submit this form in hard copy along with all supporting documents to the Office of Student Finance before the deadline. The application will **not** be entertained after the deadline.

All financial information and documents submitted to the Office of Student Finance will be treated as confidential.

Please note that submission of a financial aid application does not guarantee an award of financial aid by Habib University. Habib University will grant awards according to demonstrated need, subject to verification of information provided and as per University policies.

The University reserves the right to verify applicant's information from a recognized source or a third party and/or request additional documents or explanation of information or circumstances.

Failure to provide complete or correct information or concealment of information will result in withdrawal or denial of financial aid. The University reserves the right to take strict disciplinary action against such applicants or students.

## Checklist of Financial Aid Application Documents

**Note: Submission of all the documents listed below is mandatory, unless any particular document is not applicable. Please write "N/A" where the required document does not apply. Please tick on all the relevant boxes against which the documents are provided along with this form. Please attach all documents as per the sequence in this checklist.**

- Salary slips or certificates of all employed family members for the last month, attested by the applicable company/organization;
- If unemployed attach related documents;
- Bank statements of self and all employed family members for all active accounts, dating January 2018 through the application date (if applicable);
- Documentary evidence of all assets or property owned, including saving certificates, bonds, shares, investments (if applicable);
- Copy of scholarship(s) or funding offers received for self and family members for the relevant year and/or future scholarship or funding offer letters (if applicable);
- Tax Return statements of all employed family members for year 2017-18 (if applicable);
- Copy of rent agreement(s) (if applicable);
- Copies of last tuition fee receipts of all family members attending educational institutes;
- Copy of current month's household utility bills - electricity, gas, telephone, water;
- Copies of the last 6 months' medical bills and expense receipts (if applicable);
- Copies of CNIC of parents, guardians, other employed family member(s);
- Copy of your CNIC
- Copy of your B-Form/FRC (Family Registration Form)
- Any other document(s). Please specify: \_\_\_\_\_

## Section A: Student Information

1. Full Name: \_\_\_\_\_ 2. Application ID/Student ID: \_\_\_\_\_ 3. E-mail ID: \_\_\_\_\_
4. Phone Number: \_\_\_\_\_ 5. Marital Status:  Single  Married  Other \_\_\_\_\_
6. Citizenship Status:  Single  Dual 7. Your CNIC/B-Form # \_\_\_\_\_
8. Citizenship \_\_\_\_\_ 9. Are you currently employed?  
If yes, provide employment details in Section B  Yes  No

## Section B: Family Members' Information

1. Total number of family members : \_\_\_\_\_ 2. Number of employed family members : \_\_\_\_\_
3. Number of family members not employed: \_\_\_\_\_ 4. Number of family members going to school/college/university: \_\_\_\_\_
5. Parents' current marital status:  Married  Separated/Divorced  Mother living/Father deceased  Father living/Mother deceased
- Other \_\_\_\_\_ Current Address: \_\_\_\_\_

### Parents' / Guardians' Information

1. Father/ Guardian (Name): \_\_\_\_\_ 2. National Identity Card # : \_\_\_\_\_
3. Email address: \_\_\_\_\_ 4. Education: \_\_\_\_\_
5. Country(ies) of citizenship: \_\_\_\_\_ 6. Phone #: \_\_\_\_\_
1. Mother/ Guardian (Name): \_\_\_\_\_ 2. National Identity Card # : \_\_\_\_\_
3. Email address: \_\_\_\_\_ 4. Education: \_\_\_\_\_
5. Country(ies) of citizenship: \_\_\_\_\_ 6. Phone #: \_\_\_\_\_

## Work-related Information of Guardians & Other Family Members

1. Father/ Guardian \_\_\_\_\_ 2. Relationship with applicant \_\_\_\_\_
3. Type of work (select whichever apply, and provide details for each) :
- Employed:** Designation \_\_\_\_\_ Employer name & address \_\_\_\_\_ Monthly salary \_\_\_\_\_
- Business Owner/Partner:**  Sole proprietor  Corporation  Partnership Address \_\_\_\_\_
- Name of Business \_\_\_\_\_ Nature of Business \_\_\_\_\_ Gross monthly income \_\_\_\_\_
- Retired:** Organization name \_\_\_\_\_ Retirement date \_\_\_\_\_ Last drawn salary \_\_\_\_\_
- Unemployed** Unemployed since: \_\_\_\_\_ Last drawn salary \_\_\_\_\_

1. Mother/ Guardian \_\_\_\_\_ 2. Relationship with applicant \_\_\_\_\_
3. Type of work (select whichever apply, and provide details for each) :
- Employed:** Designation \_\_\_\_\_ Employer name & address \_\_\_\_\_ Monthly salary \_\_\_\_\_
- Business Owner/Partner:**  Sole proprietor  Corporation  Partnership Address \_\_\_\_\_
- Name of Business \_\_\_\_\_ Nature of Business \_\_\_\_\_ Gross monthly income \_\_\_\_\_
- Retired:** Organization name \_\_\_\_\_ Retirement date \_\_\_\_\_ Last drawn salary \_\_\_\_\_
- Unemployed** Unemployed since: \_\_\_\_\_ Last drawn salary \_\_\_\_\_

1. Other Family members\* \_\_\_\_\_ 2. Relationship with applicant \_\_\_\_\_

3. Type of work (select whichever apply, and provide details for each) :

**Employed:** Designation \_\_\_\_\_ Employer name & address \_\_\_\_\_ Monthly salary \_\_\_\_\_

**Business Owner/Partner:**  Sole proprietor  Corporation  Partnership Address \_\_\_\_\_  
 Name of Business  Nature of Business  Gross monthly income

**Retired:** Organization name \_\_\_\_\_ Retirement date \_\_\_\_\_ Last drawn salary \_\_\_\_\_

**Unemployed** Unemployed since: \_\_\_\_\_ Last drawn salary \_\_\_\_\_

\* Brother / Sister

### Section C: Educational Information of Siblings (Current Academic Year)

1. Family member name	2. Relationship with you	3. Name and address of university/college/school/tutoring centre	4. Education year/grade	5. Scholarship/funding received amount/year	6. Total tuition fee/year (without Scholarship)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please state an estimate for your education cost for the current academic year. If you are not currently enrolled at an education institute, then provide the cost of your last education year: \_\_\_\_\_

**Total cost of family education:**

Identify the percentage of fee contributed by the following for your education:

Parents \_\_\_\_\_ Scholarships \_\_\_\_\_ Other family member \_\_\_\_\_ Self \_\_\_\_\_ Other source \_\_\_\_\_

### Section D: Income and Source Information for Current Year

1. Name of family member/Relationship	2. Annual income/pension (gross salary + bonus + allowances)	3. Net annual income (After deductions of tax, provident fund, loan repayment, other)	4. Annual net income from investments (property/farm/rent/shares/securities)	4a. Source of income (e.g. repayment, interest, rent, etc)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total (3):

Total (4):

**Total family income (3+4)**

Savings/emergency fund amount: \_\_\_\_\_ Intended purpose: \_\_\_\_\_

## Section E: Assets Owned

Asset type (Immovable Asset)	Total area (square feet)	Address	Current Market Value (PKR)	
			Owned by Applicant	Owned by Parents/Guardian
1. Residential house	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Other land or building	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Asset type (Liquid/Movable Asset)	Description of Asset	Owned by Applicant	Owned by Parents/Guardian
3. Saving certificates/shares	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Other assets/investment	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Jewelry (gold/silver)	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Cash	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Tradable assets/inventory	<input type="text"/>	<input type="text"/>	<input type="text"/>

Current residence type  Rented  Owned  Provided by Employer Residence type:  Apartment  Townhouse  Bungalow

Vehicle type	Model	Number/quantity	Current Market Value (PKR)	
			Owned by Applicant	Owned by Parents/Guardian
1. Car	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Motorcycle	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total Asset Value</b>			Applicant <input type="text"/>	Parents/Guardian <input type="text"/>

## Section F: Household Expenses (Monthly)

Expense category	PKR / month	Expense category	PKR / month
1. House rent (if applicable)	<input type="text"/>	2. Total household help salary	<input type="text"/>
3. Food	<input type="text"/>	4. Utilities	<input type="text"/>
5. Travel/fuel	<input type="text"/>	6. Loan repayment	<input type="text"/>
7. Medical (average)	<input type="text"/>	8. Other _____	<input type="text"/>
<b>Total monthly expenses</b>			<input type="text"/>

How many persons does your family employ as household help (cook, cleaner, gardener, driver, guard)? \_\_\_\_\_

## Section G: Expected Annual Fee Contribution

Contribution Sources:	Amount in PKR
1. Expected contribution from parents/guardian/student	<input type="text"/>
2. Funding from other sources for the year	<input type="text"/>
3. Other: _____	<input type="text"/>

**Total yearly contribution for your Habib University Fee**

## Section H: Additional Explanations

Enter here any additional explanation or information about special circumstances that you would like to provide, relevant to this application, not covered in the sections above. Please provide documentary evidence supporting entered information, if applicable.

## Section I: Undertaking

Read all the statements given below, tick all boxes and enter relevant names, signatures and dates. If you do not tick and sign below, the application will not be accepted.

- We declare that the information on this form is true, correct, and complete. We understand that providing false or incomplete information and/or documents will lead to withdrawal or denial of financial aid and strict disciplinary action, subject to the University's Code of Conduct, policies, and/or applicable country laws.
- We understand that submitting a financial aid application does not guarantee financial aid, nor does it absolve us of any financial responsibility towards Habib University's education costs.
- Habib University has our permission to verify information provided in this financial aid application by obtaining documentation as needed or through other sources.

Name & signature of Father/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Name & signature of Mother/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Name & signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_