

Stream	Pre-Eng/Med	ICS	DAE(Electronic)	DAE(Electrical)	DAE(Comp.IT)
Is any member of your family currently studying at KICSIT? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, state name and number:					
Name & Semester:			Registration No.		
Give details about yourself and your siblings*: Mention clearly whether applicant is receiving merit scholarship or candidate for merit scholarship. *Siblings are brothers and sisters					
Name	Age	School/College/University (If still studying)	Annual Fee (in Rs)	If Obtaining Scholarship (in Rs)	Parent Contribution (in Rs)
Total Amount					

FINANCIAL DETAILS:

a. ASSETS: House, Plots and other Property owned by the family

S.#	Assets Title	Assets Ownership*	Current Value (in Pakistan Rupees)	Area (in Kanals/Marlas Or Sq. Feet)	Location
(I).	House				
(II).	Land/Plot				
(III).	Agriculture Land				
(IV).	Commercial Land				
Total Amount					

*In this column provide information about who owns the specific asset. It can be your father, mother, brother, or grandparents.

b. INCOME

(Give income on annual basis)

S.#	Income/Profession	Father's	Mother's	Guardian's/ Brother's & Sister's
(I)	Agricultural income (Annual)			
(II)	Salary / Pension (Annual)			
(III)	Return on Saving & Investment (Annual)			
(IV)	Rental Income(Annual)			
(V)	Business Income (Annual)			
	Total	A:	B:	C:
	Total Income: (A+B+C)			

Applicant's Signature

Father's/Guardian's Signature

Date: ____/____/____
dd mm yyyy

Date: ____/____/____
dd mm yyyy

Applicant CNIC# _____

Father/Guardian CNIC# _____

For enquiry contact us at:

- Phone No. (051)-9285059, (051)-9285127
- Fax No. (051)-9285245
- Website: www.kicsit.edu.pk

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Recommendations of Committee Members

Name and Signatures of Committee Members:

- | | | |
|------|--|----------------|
| i. | Name: <u>Dr. Syed Nasir Mahmood Shah (Convener)</u> | Signature_____ |
| ii. | Name: <u>Dr. Altaf Hussain (A/Convener)</u> | Signature_____ |
| iii. | Name: <u>Mr. Rehman Gul Khan (Secretary)</u> | Signature_____ |
| iv. | Name: <u>Dr. Waqar Farooq (Member)</u> | Signature_____ |
| v. | Name: <u>Ms. Saadia Hafeez (Member)</u> | Signature_____ |
| vi. | Name: <u>Ms. Attia Mukhtar (Member)</u> | Signature_____ |

Approved by
(Director I/C KICSIT)