



**LIAQUAT UNIVERSITY OF MEDICAL &  
HEALTH SCIENCES, JAMSHORO, SINDH, PAKISTAN.**  
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**ISO 9001:2008 Certified**



No. LUMHS/ACD/  
Dated: /00/2014

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Passport  
Size  
Photograph

**Degree Title / Program:**

### Section A:

#### Applicant Personal and Family Information

1. **Applicant's Name:** \_\_\_\_\_ Gender: Male  Female
2. University Reg. No: 

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3. Applicant NADRA 

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 NIC No.
4. Marital Status      Single       Married       Divorced
5. Date of Birth: \_\_\_\_\_ Age : \_\_\_\_\_ Nationality \_\_\_\_\_  
Place of Birth (Name of City, Country) \_\_\_\_\_  
Domicile(District Name): \_\_\_\_\_
6. Present Address \_\_\_\_\_
7. Permanent Address: \_\_\_\_\_
8. Are you currently working : Yes       No
9. If answer is Yes to Section No. 8 complete the sections (9-13)  
Designation: \_\_\_\_\_ Name of Employer /Company: \_\_\_\_\_
10. Previous Employer/Company Name (if applicable): \_\_\_\_\_
11. Total Monthly Applicant Gross Income in Pak Rs. \_\_\_\_\_
12. Total Monthly Applicant Take Home Income\* in Pak Rs. \_\_\_\_\_
13. Total Annual Applicant Gross Income: \_\_\_\_\_ Applicant NTN No. \_\_\_\_\_

\* Take Home Income: Salary / Pay available after deduction of taxes, provident fund charges etc.

14. Tel (Res.): \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_
15. Total Members in the Family: \_\_\_\_\_
16. Total Family Members currently living with you: Total: \_\_\_\_ Male: \_\_\_\_ Female: \_\_\_\_
17. Total Number of Brothers/Sisters married Total: \_\_\_\_\_ Brothers \_\_\_\_\_ Sisters \_\_\_\_\_

S #	Name of Family Member (s)	Relationship	Marital Status	Remarks**
1				
2				
3				

4				
5				
6				
7				

\*\*Remarks: List down the number of dependents supported by married brother(s)/ sister(s)

18. Brothers/Sisters/Children/Family Members studying \_\_\_\_\_

Details of Siblings Studying including the applicant own detail

S #	Name	Relation with applicant	Name & Address of Institute	Fee per month	Tuition per month (If applicable)
1					
2					
3					
4					
5					
6					
<b>22</b>	Total Fees & Tuition Charges				

19. **Fath e r 's Na me:** \_\_\_\_\_ Computerized N.I.C. No \_\_\_\_\_

20. Father Status: Alive  Deceased  ( if deceased please mentioned the date of demise (dd-mm-yy) \_\_\_\_\_ )

21. Professional status: Employed  Retired

If answer is Employed complete the sections (22-30) else from (27-30)

22. Name of Company/Employer: \_\_\_\_\_

23. Address: \_\_\_\_\_

24. Tel (Off): \_\_\_\_\_ Mobile: \_\_\_\_\_

25. Occupation : \_\_\_\_\_

26. Designation & Grade ( BPS/ SPS/PTC etc): \_\_\_\_\_

27. Total Gross Monthly Income (Salary/ Pension/ Others): \_\_\_\_\_

28. Total Net Monthly Take Home Income (Salary/ Pension/ Others): \_\_\_\_\_

29. Previous Occupation (if applicable): \_\_\_\_\_

30. Total Annual Income: \_\_\_\_\_ NTN \_\_\_\_\_

31. **Mother's Status:** Alive  Deceased  (if deceased please mentioned the date of demise (dd-mm-yy) \_\_\_\_\_)

32. Marriage Relationship: Combined  Separated/Divorced

33. Professionals Status: Working  Not Working

**Any Other Supporting Person (Mother/ Guardian/ Brother/ Sister/Family Relative/Guardian) [Add Page if required]**

34. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

35. Address: \_\_\_\_\_

36. Tel (Off/Res) \_\_\_\_\_ Mobile No. \_\_\_\_\_ NIC no. \_\_\_\_\_

37. Occupation \_\_\_\_\_

38. Designation \_\_\_\_\_ Name of Company/Employer \_\_\_\_\_

39. Total Monthly Gross Income (Salary/ Pension/ Others) \_\_\_\_\_

40. Total Net Monthly Take Home Income (Salary/ Pension/ Others): \_\_\_\_\_

41. Total Net Annual Income \_\_\_\_\_ 44. Monthly Financial Support Available from supporting person to Applicant in Pak Rs. \_\_\_\_\_

**45. Asset Income** (on monthly basis)

S #	Income Source	Father	Mother	Spouse	Self	Other	Total
1	Property Rent						
2	Land Lease						
3	Bank Deposits*						
4	Shares / Securities*						
5	Other (Specify)						
<b>45</b>	<b>Total</b>						

\* For sources with annual income returns, kindly report the monthly income earned

42. Total Earning Members in Family: \_\_\_\_\_

43. Total No of family members not earning \_\_\_\_\_

## 44. Details of Family Members Earning:

S #	Family Member Name	Relationship	Family Member occupation ***	Organization Name	Designation	Monthly Gross Pay/Earning	**Remarks
1							
2							
3							
4							
<b>44</b>	Total Monthly Family Income (add self income, if applicable) Pak Rupees						

\*\* Please mentioned if the Family member supporting to Family in Remarks Column (Yes/No)

\*\*\* Family Member Occupation classification

1. Government Service (Specify the employment grade BPS/SPS/PTC etc.)
2. Private Job
3. Agriculture/Farming
4. Own Business (Self Employed). Details/nature of self business need to filled in at remarks column
5. Others. Details/nature of self business need to filled in at remarks column

**46. Total Family Monthly Income**

S #	Family Member Name	Relationship	Monthly Income from Assets (Sec. 45)	Monthly Gross Pay/Earning	Monthly Net (Take home) Pay/Earning
1					
2					
3					
4					
5	Applicant Monthly Gross Pay/Earning (Sec. 11)				
6	Applicant Monthly Net (Take home) Pay/Earning (Sec. 12)				
<b>46-A</b>	Total Monthly Income in Pak Rupees				
<b>46-B</b>	Total Annual Income in Pak Rupees				

**FAMILY EXPENDITURES**

**47. Accommodation Expenditures ( Please Check the relevant boxes)**

**Type:** Bungalow  Apartment /Flat  Town House  Village House   
**Structure:** Pucca House  Kutchra House  Semi Pucca House  Others  (Detail available at Page 1 &2)  
**Status:** Rented  Self or Family owned  Employer / Govt Owned   
**Rent Payment:** Self  Employer/Govt  Others   
 Total Size of the House in Sq. ft. \_\_\_\_\_ Covered Area in Sq. ft. \_\_\_\_\_

S #	Accommodation Location /Address	Number Of Bed Rooms		Number Of Air conditioners		Accommodation Monthly Rent	Accommodation Annual Rent
		1-2		Nil			
		1-2		Nil			
		2-4		1-2			
		4-6		3-6			
		6-8		6-8			
		Above 8		Above 8			
<b>48</b>	Total Accommodation Rental Expenditure						

Any other house/flat owned by the Parents/Guardian (if yes please specify with location and size) \_\_\_\_\_

**49. Utilities Expenditures**

Last Month Utilities Paid			
Telephone	Electricity	Gas	Water

Average of Last Six Months (Per Month Utilities Charges)					
S #	Telephone	Electricity	Gas	Water	Total
<b>49</b>					

**50. Monthly Food /Kitchen Expenditures** \_\_\_\_\_

**51. Medical Expenditures:** Average of last six months (Per Month Expenditure) \_\_\_\_\_

**52. Travelling/ Miscellaneous Expenditures**

Average of last six months (Per Month Expenditure) \_\_\_\_\_

**Total Family Expenditures**

S #	Education Expenditure (Sec. 22)	Accommodation Expenditure (Sec. 48)	Utilities Expenditure (Sec. 49)	Food Expenditure (Sec. 50)	Medical Expenditure (Sec. 51)	Misc. Expenditure (Sec. 52)	Total Monthly Expenditure (52.A)	Total Annual Expenditure (52.B)
<b>52</b>								

S #	Description	Amounts in Pak Rupees
(Sec.46-A)	Total Monthly Income	
(Sec. 52-A)	Total Monthly Expenditure	
<b>53-A</b> (46.A – 52.A)	Net Monthly Disposable Income*	

S #	Description	Amounts in Pak Rupees
(Sec.46-B)	Total Annual Income	
(Sec. 52-B)	Total Annual Expenditure	
<b>52-B</b> (46.B – 52.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

## Section B:

### Cumulative information of Self, Parents and Guardian Assets

#### Assets (with current market value)

53. 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					
3					
4					

\* Others: include tractor, rickshaw, bi-cycle, motorcycle rickshaw, carriage pick, truck etc.

54. Number of Cattle(s) (with kind) \_\_\_\_\_

55. Area and location of Land(s)/Plot(s) owned \_\_\_\_\_

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

56. 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)						
<b>56</b>	<b>Total</b>						

57. Taxes paid (per annum in Pak. Rs.) \_\_\_\_\_

**Section C:**  
**Financial arrangements for current year**

**58. Funds Availability for Applicant Education** (per annum in Pak Rupees)

S #	Income Source	Father	Mother	Spouse	Self	Other	Total
1	Salary / Earnings						
2	Family / Friend Advances & Loan *						
3	Bank Loan						
4	Other (Specify)						
<b>58</b>	<b>Total</b>						

\* Family/ Friend Loan  
(Specify relationship with the relative / friend)

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**59. Any source of financing other than this scholarship (Please specify)**

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**60. How were the admission /first semester charges paid?**

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**Section D:**  
**Applicant Educational Record**

Level of Study	Name of the Institute	*Address of the Institute	Period(Start & End Date)	Per Month Fee	Division/ GPA/ Grade
Bachelors					
Intermediate					
Higher Secondary					
Secondary					
Primary					

\* At least the name of the City is required in the field.

**61. Have you ever awarded any other scholarship before:** Yes  No

(If yes fill the details of scholarships & attach documentary proof of the scholarships)

S #	Name of Institute	Scholarship Name	Total Scholarship Amount	Total Scholarship Period	Class / Level at which Scholarship was granted
1					
2					
3					

**Statement of Purpose** (Explain your suitability for this scholarship) - attach separate sheet if required

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**UNDERTAKING**

- The information given in this application is true to the best of my knowledge and I understand that any incorrect information will result in the cancellation of this application. If any information given in this application is found incorrect or false after grant of financial assistance, the institute will stop further assistance and the student will have to refund all payment received and or penalty equal to total scholarship amount.
- HEC reserves the right to use information given in this form for verification and other purposes.

Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Date: Parents / Guardian Signature \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

**For Official use only**

Are the applicant documents in order?  Yes  No

The notices furnished to the applicant for furnishing of required documentation

S #	Notice Date	Document Name Missing	Document Submission Date	Remarks
1				
2				
3				
4				

Application Case Review Dates (i) \_\_\_\_\_ (ii) \_\_\_\_\_

Additional Remarks

\_\_\_\_\_ Date

\_\_\_\_\_ Department Name

\_\_\_\_\_ Signature Head of Department / Focal Person

## Evaluation Sheet Completion Guidelines

1. Sno
2. Name of the candidate as appeared on the Applicant Form
3. Father's Name of the candidate
4. The program in which the candidate is enrolled
5. New Nadra ID Card No. in case of non availability please mentioned B form No
6. Name of the last institution where candidate was studying
7. Per Month fee of the last institution attended by the candidate
8. Marital status of the candidate : Single/Married
9. Father status Alive/Deceased
10. Profession of the father / Guardian
11. No. of family member(s) who are not earning
12. Number of family member(s) studying
13. No of family member(s) who are earning
14. per net month (take home) Income of Father/guardian (Salary/Pension/Business Income etc)
15. per month Income of Mother (Salary/Pension/Business Income etc)
16. Income from land
17. Income from other sources like defense saving certificate, shares and other government securities
18. Total of monthly income
19. Total Annual Income
20. Average per month Gas bill (put average of last six month)
21. Average per month Electricity bill (put average of last six month)
22. Average per month Telephone bill (put average of last six month)
23. Average per month water bill (put average of last six month)
24. Total of per month Utility bills
25. Per month education expense mentioning cumulative family education expenditure and applicant education expenses
26. Per month food/kitchen expenses
27. Per month Medical expenditure of the family
28. Other Misc Expenditure. Mention any liabilities like loan payments, lease rentals etc.
29. Total expenditure of the family on monthly basis
30. Annual Expenditure of the family
31. Monthly Disposable Family Income (Difference of Take Home family income and monthly net expenditures)
32. Total number of vehicles owned by the family (car / motor cycle)
33. Type of the vehicle (car / motorcycle)
34. Make & model of the vehicle

35. Vehicle Engine Capacity in Cubic Centimeter
36. mentioned the size of the land/plot
37. Current market value of the land/plots
38. Accommodation (Rented/Owned)
39. Type of Accommodation (Town House, Flat,etc.)
40. Market value of the house
41. Current Bank Balance
42. Value of Prize bond/shares, defense saving certificates
43. Other Misc Assets
44. Total Assets value
45. Mentioned any other important information in Remarks Column. The remarks should specify the reasons for selection and non selection of a candidatte.