

## **Scholarship / Financial Support for Needy Students APPLICATION FORM**

### Scholarship/ Financial Support

is based on assessment of need and merit as well as availability of funds. Selection will be decided on the basis of information provided in this form and verification of the provided information. Candidate may be required to appear for interview (s).

### **PROVIDING FALSE INFORMATION**

**Providing false information may result in one or all of the following:**

- Cancellation of admission.
- Rustication from the institution.
- Initiation of criminal proceedings.
- Disqualification for award of any future loan/scholarship.
- Refund of all the payment received and/or a penalty equal to total scholarship amount.

### **INSTRUCTIONS FOR FILLING OUT THE SCHOLARSHIP APPLICATION FORM:**

- ④ Read the application form carefully.
- ④ Make a photocopy of the application form
- ④ Complete the photocopy form and make sure everything is correct and final
- ④ Copy all information from photocopied form to the original form
- ④ Fill in the form in capital letters
- ④ Submit duly completed application form to the Principal.
- ④ Furnish factual, comprehensive and authentic information in the form
- ④ Keep a photocopy of the filled-in original application form for your record
- ④ Ensure that you have attached all the required documents by putting a tick mark in checklist
- ④ Answer all questions. Those not applicable should be marked "N/A"
- ④ Affidavit Need to be submitted after final selection of the candidate

### **DO's:**

- Submit your application by hand to the Principal Office.
- Place documents in appropriate order.

Name of the Institution: \_\_\_\_\_

Course/Degree Title: \_\_\_\_\_

**Section A: Personal and family information**

1. **Applicant's Name:** \_\_\_\_\_ Gender: Male  Female

2. Institution Reg. No. \_\_\_\_\_ Computerized NIC No. \_\_\_\_\_

3. Marital Status      Single  Married  Other

4. Age \_\_\_\_\_ Days \_\_\_\_\_ Months \_\_\_\_\_ Years \_\_\_\_\_

5. Address \_\_\_\_\_

6. Occupation \_\_\_\_\_

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

8. Tel (Res.) \_\_\_\_\_ Mobile \_\_\_\_\_

9. Email \_\_\_\_\_

10. Total Monthly Take Home Income \_\_\_\_\_

11. Total Annual Income \_\_\_\_\_ NTN \_\_\_\_\_

12. Previous Occupation (if applicable) \_\_\_\_\_

13. **Father's Name:** \_\_\_\_\_ Computerized N.I.C. No \_\_\_\_\_

14. Status    Alive       Dead

15. Address: \_\_\_\_\_

16. Tel (Off/Res) \_\_\_\_\_ Mobile \_\_\_\_\_

17. Occupation \_\_\_\_\_

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

19. Total Monthly Take Home Income (Salary/Pension/Others) \_\_\_\_\_

20. Total Annual Income \_\_\_\_\_ NTN \_\_\_\_\_

21. Previous Occupation (if applicable) \_\_\_\_\_

22. **Any Other Supporting Person (Mother/Guardian/Brother/Sister/Other):**

23. Name \_\_\_\_\_ Computerized N.I.C. No \_\_\_\_\_

24. Address: \_\_\_\_\_

25. Tel (Off/Res) \_\_\_\_\_ Mobile \_\_\_\_\_

26. Occupation \_\_\_\_\_

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

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

29. Total Annual Income \_\_\_\_\_ NTN \_\_\_\_\_

30. Brothers/Sisters/Children/FamilyMembers

Relation with applicant	Name	Name of Institute (if studying)	Fee per month

**Section D: Educational Record**

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

**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 / financial relief amount.
- Prime Foundation reserves the right to use information given in this form for verification and other purposes.

\_\_\_\_\_  
Signature of student

**Principal Office**