

The Secretary  
Babar Ali Foundation  
308 – Upper Mall  
Lahore

**APPLICATION FOR GRANT OF SYEDA MUBARIK BEGUM SCHOLARSHIP  
FOR HIGHER EDUCATION OF GIRLS**

Dear Sir,

I am a regular student (not "self-supporting" category) of \_\_\_\_\_ class

at the \_\_\_\_\_ college/university.

I am in need of financial assistance in order to complete my studies satisfactorily and I request you to grant me a scholarship under the Syeda Mubarik Begum Scholarship Scheme of your Foundation. Information relevant to my academic record, available financial resources, etc. is given below.

**PART-A**

I. (i) Name \_\_\_\_\_ d/o \_\_\_\_\_

(ii) Permanent Address \_\_\_\_\_

(iii) Date of Birth \_\_\_\_\_  
(Please attach an attested copy of evidence such as the Matriculation Certificate)

(iv) N. I. Card No. \_\_\_\_\_ (Please attach a photocopy of the National Identity Card)

II. (i) Guardian's Name \_\_\_\_\_ (ii) Profession \_\_\_\_\_

(iii) Permanent Address \_\_\_\_\_

(iv) N.I. Card No. \_\_\_\_\_ (Please attach a photocopy of the Identity Card)

(v) Number and ages of your brothers and sisters \_\_\_\_\_

III. (i) Monthly Income of the guardian from:

a) Employment \_\_\_\_\_ (c) Property \_\_\_\_\_

b) Business \_\_\_\_\_ (d) Other sources \_\_\_\_\_

TOTAL: Rs. \_\_\_\_\_ per month

(Please attach Income Certificate)

(ii) Particulars (including source, amount and duration) of any merit or other scholarship, stipend, Qarz-e-Hasana or other financial assistance received or promised for your present course of studies \_\_\_\_\_

(iii) Have you previously received Syeda Mubarik Begum Scholarship? If yes, please provide details \_\_\_\_\_

*Please follow these instructions carefully:-*

1. *The application should be completed in your own handwriting. A complete application and unambiguous replies to its questions will help the Foundation in processing your case expeditiously. Particular attention is invited to the Note under Sections VI-VIII of this application.*
2. *In case your parent/guardian is in regular employment, his/her Income Certificate must be from the employer. In other cases, the certificate should be obtained from a gazetted officer or the Councilor of the area, who should put his/her office stamp on it.*
3. *The application must be supported by attested copies of certificates, where required. You shall be required to produce the originals at the time of interview for the Scholarship.*
4. *Please check whether at least the following documents have been attached with the application:-*

- |   |  |     |    |
|---|--|-----|----|
| i) Copy of N.I. Card (self)   | <table border="1"><tr><td>Yes</td><td>No</td></tr></table> | Yes | No |
| Yes   | No   |     |    |
| ii) Evidence of date of birth   | <table border="1"><tr><td>Yes</td><td>No</td></tr></table> | Yes | No |
| Yes   | No   |     |    |
| iii) Copy of N.I. Card (Guardian)                                     | <table border="1"><tr><td>Yes</td><td>No</td></tr></table> | Yes | No |
| Yes   | No   |     |    |
| iv) Income Certificate  | <table border="1"><tr><td>Yes</td><td>No</td></tr></table> | Yes | No |
| Yes   | No   |     |    |
| v) Copies of results of examinations passed                           | <table border="1"><tr><td>Yes</td><td>No</td></tr></table> | Yes | No |
| Yes   | No   |     |    |
| vi) Part B completed, certified and signed by head of the institution | <table border="1"><tr><td>Yes</td><td>No</td></tr></table> | Yes | No |
| Yes   | No   |     |    |

Reasons, if not attached

Name of applicant \_\_\_\_\_

- : 3 :-

- IV. (i) Name & address of college/university at which you are studying presently \_\_\_\_\_  
\_\_\_\_\_
- (ii) Particulars of Course and Enrollment No: \_\_\_\_\_
- (iii) Month & year started \_\_\_\_\_
- (iv) Duration of the course and the date (month and year) of expected completion \_\_\_\_\_  
\_\_\_\_\_
- (v) Month/year up to which college/university fees have to be paid \_\_\_\_\_
- (vi) Please state whether you are living in a hostel \_\_\_\_\_
- (vii) Examinations passed (Please attach attested copies of result/marks sheets):-

Name of Examination	Name of Board/University	Year of Passing	Marks			Division or grade	Remarks *
			Total	Obtained	%		
a) Matriculation 'O' Level							
b) Intermediate							
c) Degree							
d) Post Graduate							
e) Diploma/ Certificate							
f) Professional Studies							

- \* 1. Indicate also whether cleared in whole or in parts.  
2. Reasons for gaps, if any, in the continuity of studies should be stated.

- V. i) Please give details of your average monthly expenses on-
- a) Fees \_\_\_\_\_ d) Transport \_\_\_\_\_
- b) Books \_\_\_\_\_ e) Hostel-Mess \_\_\_\_\_
- c) Other incidental expenses at the Institution \_\_\_\_\_ f) Hostel-other expenses \_\_\_\_\_
- TOTAL Rs.** \_\_\_\_\_ per month
- ii) Please describe how these expenses are presently being financed.  
\_\_\_\_\_  
\_\_\_\_\_

VI. Brief reasons for selecting your course of studies.

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VII. Why do you consider that the grant of a Syeda Mubarik Begum Scholarship to you for this course will contribute to the uplift and welfare of women?

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VIII. Describe community service, if any, rendered by you during the preceding 12 months.

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*Note: (The Foundation attaches great importance to your statements in sections VI-VIII above. You are, therefore, advised to be as explicit as possible. You may attach a separate sheet for this purpose, if necessary).*

IX. I declare that whatever is stated in this application is correct to the best of my knowledge and belief and that the information given above is complete in all respects.

I understand clearly that in case a Syeda Mubarik Begum Scholarship is awarded to me, its continued disbursement will depend upon satisfactory conduct, punctuality and progress in my studies along with my continuing need for financial assistance, and that Babar Ali Foundation reserves the right to discontinue it, reduce its amount/period and/or amend the terms of its grant at any time without assigning any reason.

Place \_\_\_\_\_

Signature of applicant

Date \_\_\_\_\_

Full Name \_\_\_\_\_  
Phone Number \_\_\_\_\_

**APPLICATION FOR GRANT OF A SYEDA MUBARIK BEGUM SCHOLARSHIP**

**PART-B \***

**CERTIFICATE FROM THE VICE CHANCELLOR/PRINCIPAL/HEAD  
OF EDUCATIONAL INSTITUTE**

Certified that

- a) the applicant Ms. \_\_\_\_\_ d/o \_\_\_\_\_  
(Enrollment No. \_\_\_\_\_ of \_\_\_\_\_ of Regular Session (not "self-supporting" category) of class/course) bears good moral character and her conduct and punctuality have been consistently satisfactory;
- b) the applicant obtained \_\_\_\_\_ marks out of \_\_\_\_\_ securing \_\_\_\_\_ division in the last examination passed by her in this institute;
- c) the applicant was admitted to the present class/course on \_\_\_\_\_ and will complete it by \_\_\_\_\_; she is required to pay her fees and other dues till \_\_\_\_\_ for the completion of her course;
- d) all the particulars mentioned by the applicant in Part "A" of this application have been verified and are hereby confirmed; and
- e) the applicant is in real need of financial assistance; and
- f)\*\* i) the applicant is not receiving a scholarship/stipend/zakat/qarze hasana/financial support from any source.  
ii) the applicant has been sanctioned / is entitled to a merit scholarship at the rate of Rs..... p.m. for the period \_\_\_\_\_ to \_\_\_\_\_.  
iii) the applicant is receiving financial support from \_\_\_\_\_ at the rate of Rs. \_\_\_\_\_ p.m., which has been sanctioned up to \_\_\_\_\_ (month/year)

I recommend the grant of Syeda Mubarik Begum Scholarship to her for the duration of the Regular Session (not "self-supporting" category) of the course from \_\_\_\_\_ to \_\_\_\_\_ to enable her to complete it satisfactorily.

**Signature of Vice Chancellor/Principal/Head of Institute**

Full name \_\_\_\_\_

Designation & Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

**Office Seal**

**Notes**

\*This Part is required to be filled in and certified by the head of the institution. Babar Ali Foundation shall be grateful for the cooperation of the institution authorities in providing full and unambiguous information in this certificate. The period for which the scholarship needs to be given must be indicated. It should also be clearly stated whether the applicant is in receipt of financial assistance or scholarship from any source and if so, the amount and period for which it is available should be described. The date by which the applicant's course of studies is due to be completed may kindly be mentioned, and the month/year up to which the university or college dues (i.e. fees and other charges) have to be paid by the applicant for the completion of her course should also be indicated.

\*\* Inapplicable statements should be clearly struck out.

INCOMPLETE APPLICATION WILL NOT BE ENTERTAINED