Office Copy

Student Copy

APPLICATION ACKNOWLEDGEMENT RECEIPT FOR THE SESSION JULY 2016 – JUNE 2017 (Use Capital Letters)

			Sr. No Date						
Student Name									
Father / Guardian Name									
CNIC No. of Student									
Permanent Address of Parents / Guardian House No									
Mohallah	P/O	Tehsil _							
Distt:	_ City	Province							
Name of Institutions									
Faculty / Department)									
Applicant Signature		_	re of Receiving Officer Branch Stamp						
Note: Branch Manager ensure that application form is properly filled in all respect									

APPLICATION ACKNOWLEDGEMENT RECEIPT
FOR THE SESSION JULY 2016 – JUNE 2017
(Use Capital Letters)

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	<u> </u>	_	Sr. No					
			Date					
tudent Name		·						
ather / Guardian N	lame							
CNIC No. of Student	<u></u>							
Permanent Address	of Parents / Guardian H	ouse No						
Mohallah	P/O	Tehsil						
Distt:	City	Province						
Name of Institution	s							
aculty / Departme	nt)							
Faculty / Departme	nt)							

Applicant Signature

Name & Signature of Receiving Officer with Branch Stamp

Note: Applicant must obtain Application Acknowledgement Receipt from the Branch Manager

		APPLI <u>F</u>			N FO											EME		pplic	ation	form i	in Dup	plicate
1. Personal	details: All	l entries s	houl	ld be	e in (CAP	ITA	L LI	ETT	ER	S, lea	ave s	pace	es be	etwe	en se	para	ate V	VOF	RDS		
Name of	Applican	t																				
S/o. D/o.																						
Permanen	t Address																					
Phone/Fax	x/E-Mail																					
Temporar	y Address																					
Phone/Fax	x/E-Mail																					
Date of Bi	irth				-			-														
Guardian	Name																					
Parent(s) (
Parent (s) Guardian Income Rs. (Gross)											P	er A	nnu	m								
Computer No. of Par																						
Name of C University		Study)																				
2. Study prog	gram (please	e tick the r	eleva	nt b	ox)																	
	GRA	DUATION	N							POS	ST-G	RAI	UAT	ΓΙΟΝ	J.				Ph.	D		
B.S (IT)						M.	S (IT))	M.S (CS)			M.Com										
B.B.A B. Sc	B. E B.A	M.B.B. B.D.S	S	BS	S		M.]	B.A A			1.S .L.M	[M. 1								
3. a) Date o	f Admission	for the st	udy j	progi	ram a	ıs pe	r (2)	abov	e _			MM/Y			(b) S	Subje	ect					
4. Duration o	of Study as p	er (2) abo	ve (P	lease	e tick	the	relev	ant l	box)													
i) Total yea	ars of study	programn	ne				1-	Year		2-	Yea	rs	3-	Yea	rs	4-	-Yea	rs	5-	-Yea	rs	
ii) Current	Year of Stu	dy Progra	mme	,			1 st	Year		2 ^r	^{id} Ye	ar	3 ^r	^d Yea	ır	4 ^t	h Ye	ar	5 ^t	th Ye	ar	1

4. Duration of Study as per (2) above (Please tick the relevant box)										
i) Total years of study programm	e	1-Year	2-Years	3-Years	4-Years	5-Years				
ii) Current Year of Study Program	1 st Year	2 nd Year	3 rd Year	4 th Year	5 th Year					
5. Purpose for which the loan is required for current year of study program as per 4(ii) above.										
a) Total Fee Rs	·	•								
6. Estimated loan required for remaining period of study program as per 4(ii) above.										
a) Total Fee Rs	b) Boarding R	Rs	c	e) Text Books	s Rs					

7. State the details of Examinations passed from S.S.C. onward.

Name of Examination	Name of Board/	Year of	MARKS		Division /
	University	Passing	Total	Obtained	Grade

8	. Whether receiving any scholarship (s) or stipend (s) during the current study, If so, state the	amount and
	Source.	

Yes	No

I have fully read and understood the rules and regulations governing the Students Loan Scheme, and do hereby undertake to abide by them and to repay the loan in accordance with the terms and conditions prescribed by the Competent Authority.

Dated	(SIGNATURE OF APPLICANT)

Certificate from the N.B.P Branch Manager

The Financial standing of the parents / guardian of								
Mr. / Miss								
S/o. /D/o								
Resident of House NoMohallah:								
Area P/oTehsil								
District City								
has been verified and is hereby confirmed as per policy of the scheme.								
i. Parents CNIC No								
ii. Students CNIC No								
iii. Telephone / Cell No								

Name & Signature of Br. Manager
(Office Stamp and Signature No.)

BANK MANAGER is advised to put their name and Signature No. on the Certificate otherwise application shall not be entertained.

Applicant is advised to verify their parents financial standing FROM THE BANK MANAGER, otherwise application shall not be entertained.

Important Note:-

As per Apex Committee decision "Branch Managers will also submit his/her Report regarding income of parents/guardians while forwarding the applications to the Students Loan Wing, Credit Management Group, NBP, Head Office. In case the application's residential address does not fall within his/her jurisdiction, the particulars (i. S.No. ii. Application No. iii. Name of the Students iv. Address v. University / Colleges vi. Subject vii. Name of the Study and viii. Parents/Guardian (Income/Profession) of the students will be forwarded by him/her to the branch of the bank nearest to the residence of the student for the assessment of the financial status of the parents/guardians. Note repeat Note that the financial status of the parents/guardians will be assessed by the Branch manager, keeping in view their standard of living".

THIS CERTIFICATE SHOULD BE ISSUED BY VICE CHANCELLOR/ PRINCIPAL/REGISTRAR ON INSTITUTION LETTER HEAD

Certi	ified tl	hat Mr./Miss _		S/o. D/o.		is	
a bon	afide	student of		and s	tudying in		
			(Name of the Instit	tution)	* (Na	me of programme/subject)	
of _	** (Yea	ar of study)	under registra	ations / enrolmer	nt number		
It is	furth	er certified:					
	a)	That the app consistently s		od moral charact	er and his/her	behavior has been foun	
	b)	That the appli	cant is in real n	eed of financial as	sistance.		
	c)			receiving scholars Rs.		during the current year of	
	d)	That the appropercentage	plicant has obt	tained public examination	_ marks out on held on/ DD/	ofin term ofinterm ofin_	
	e)	That he/she course/proced		mitted in the Ins	stitution on m	nerit through the norma	
	f)		and fallen			present programme days	
	g)			ed by the applica applicant at the tim		verified from the originant.	al SD
•	h)		•		is (No. of Years	years and will be	3
		completing 0	y the end of	<u></u>			
	i)	Recommende	d for grant of lo	oan for the entire/re	emaining period	l of studies.	

Signature of Vice Chancellor / Principal/ Registrar

Explanation

- * Name of programme /subject for example B.Sc Chemical Eng., B.Sc Physics, M.Sc Agriculture etc.
- ** Year of study means 1st Year, 2nd Year or 1st Semester and 2nd Semester and so on.
- (d) GPA will be mentioned in term of percentage. Evidence issued by the authority must be attached.
- (f) Date of admission must be mentioned properly as per record of the institution.

IMPORTANT INSTRUCTIONS

Application Form will not be entertained if the same is not properly & duly filled in and found missing therewith the following documents.

- i) Two Photographs of Student attested by not below the rank of BPS-17.
- ii) Attested photocopies of Fee Challan raised/demanded by the Educational Institution and Boarding expenses (excluding meal charges).
 - a) Income certificate from the employer i.e. Government/ semi Government/ Private service
 - b) Income Certificate from the area counselor of the Union Counsel i.e. for self employed
- iii) Attested photocopies of:
 - a) Domicile
 - b) Computerized N.I.C of Parents and Students.
- iv) Attested photocopies of all educational certificates
 - a) Secondary School Certificate
 - b) Higher Secondary Certificate
 - C) Degree(s)
 - d) Marks Sheet/Transcript (Last Examination)
- v) A certificate (in original) from the Vice Chancellor/ Principal/Registrar of the concerned University Letter Head confirming date of admission and completion date of study
- vi) Four un-stamped self-addressed envelope (Permanent & Hostel Address) (size 5 X 11).
- vii) Application shall be considered on merit according to availability of funds. Any application which is not made on the prescribed form or is un-signed or does not contain the Required particulars and documents or reaches late will not be entertained.
- viii) Current and remaining Year fee must be mentioned in column No. 5 & 6 to avoid any wrong calculation of fee.