

University of Sargodha

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FINANCIAL AID FORM

Student ID							
Degree Program			_		Curren	nt Semester	
Name						No of Siblings	
Father's Name							
Guardian's Name Relationship & Address							
(If Father is not alive)							
Father's/Guardian's Occupation & Monthly Income from all sources							
Are you receiving any Scholarship or Aid (Yes/No)							
If Yes, state the source and amount of Scholarship/Aid							
Academic Record							
Examination		Year	Marks	Divi	ision/Grade	Name of Board/University	
Secondary School							
F.A/F. Sc/A-Level/Others	S						
B.A/B.Sc/BCS/Others							
Note:- Attested photo copies of the certificates must be attached							
Progress Report of the I	Previous	Semester	c(s)				
1 st Semester	GPA		_		2 nd Seme	ester CGPA	
3 rd Semester	CGPA		_		4 th Semes	ter CGPA	
5 th Semester	CGPA		_		6 th Semes	ter CGPA	
7 th Semester	CGPA		_				
				Note:	Write which	ever is applicable	

Are you a member of University First Class	Team (Yes/No)
if yes state which game you like the most	
State the participation taken in Co-curricula	ar Activities
TIME	DEDTAVING
I undertake to refund the amount of Fee Conc	DERTAKING ression alongwith an equal amount as Fine in case any form. I will also be liable to any disciplinary action by
Signature of the Applicant (Attach copy of College I.D Card)	Signature of Applicant's Father/Guardian (Attach attested copy of CNIC)
INST	RUCTIONS
Attach following documents	<u>Rections</u>
1. Utility Bills (Electricity, Sui Gas, Telephon	e) of last three months
2. If residing in rental house, copy of rent dee	ed
3. If Father not alive, copy of Death Certifica	te
4. Father/Guardian's Income Certificate duly	attested by the Employer
Note: Incomplete form will not be accepted	
Recommendations by the Chairperson/Prince	cipal of the Department/College
Signature	Date
Official Stamp	