





China Embassy Fund Scholarship Application Form for the students enrolled in BS Degree Program (Session 2021-22), MA/MSc. (Session 2020-21), MS/MPhil & Ph.D. Degree Program (Session 2021-21)

Student Financial Aid Office (SFAO),
Directorate of Admission,
University of Peshawar
Email: scholarships@uop.edu.pk

University of Peshawar

Instructions For China Embassy Fund Scholarship Application Form

Instructions for Applying (Read Carefully)

- ✓ China Embassy Fund Scholarship is only for the BS Degree Program (Session 2021-22), M.A/MSc. (Session 2020-21) & Higher Studies MS/MPhil & Ph.D. (session 2020-21)
- ✓ Allocated slots are reserved for financially weak and needy students.
- ✓ Award of Scholarships will be decided on the NEED cum MERIT basis.
- ✓ Applicants, who do not secure admission, will not be entertained.

Hard copy of China Embassy Fund Scholarship application form along with all supported documents should be submitted at **Concerned Department/Institute & College on or before December 22, 2021**

- ✓ Incomplete application forms will not be entertained.
- ✓ In case of providing false information or concealment of any relevant fact regarding financial status, in any point of time from application date till graduation, his/her scholarship will be immediately deferred and he/she will be terminated from the program.

Required Supporting Documents:

Please Attached attested photo copies of the following applicable documents

- 1. Passport size photograph
- 2. Domicile of Applicant
- 3. CNIC / Form B of the Applicant
- 4. CNIC of the Applicant's Father /Guardian
- 5. Bonafide Certificate
- 6. Income Certificate of the Father /Guardian of the applicant
 - i. Salary Slips if the father/Guardian is a salaried person
 - ii. Income Certificate on stamp paper in case Father/Guardian is self-employed.
 - ii. Pension Copy if Father/Guardian is retired.
- 7. Utility Bills (Electricity, Gas, Telephone, Water) of last six months.
- 8. If the Medical expenses exceeds Rs. 2000 then attached Medical Reports and Bills.
- 9. Death Certificate from Competent Authority (Medical Doctor, Employer, Secretary Union Council, Tehsildar or Political Agent), if applicable.
- 10. Rent agreement, if house is rented.
- 11. Copies of previous scholarship(s) attained (if applicable).
- 12. Any other relevant document / proof / certificate.

IMPORTANT INFORMATION

Selection under China Embassy Scholarship will be decided on the basis of information provided in this form and investigations for the authentication of 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 university.
- 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:

- ✓ Fill in the form using black ball point pen and write in capital letters and leave space between words
- ✓ Read the application form carefully.
- ✓ Make a photocopy of the application form
- ✓ Complete the photocopy form and make sure everything is correct and final
- ✓ Copy all information from photocopied form to the original form
- ✓ Submit duly completed application form at China Study Centre
- ✓ Furnish factual, comprehensive and authentic information in the form
- ✓ For family financial reporting parents/guardian may be consulted for guidance
- ✓ Whenever in doubt or lost, seek help from the Focal Person
- ✓ Check your application for spellings, grammatical errors and factual oversight
- ✓ Keep a photocopy of the filled-in original application form for your record
- ✓ Ensure that you have attached all the required documents by putting a tick mark in checklist
- ✓ Answer all questions. Those not applicable should be marked "N/A"
- ✓ Agreement Needs to be submitted after final selection of the candidate

Definitions:

Family: Father, mother(s), brother(s), sisters(s), Maternal / Paternal Uncles (s) & Aunts, Grandparents etc.

Pucca House: A pucca house is one, which has walls and roof made of the following material.

Wall material: Burnt bricks, stones (packed with lime or cement), cement concrete, timber, ekra etc

<u>Roof Material</u>: Tiles, GCI (Galvanised Corrugated Iron) sheets, asbestos cement sheet, RBC,(Reinforced Brick Concrete), RCC (Reinforced Cement Concrete) and timber etc.

<u>Kutcha House:</u> The walls and/or roof of which are made of material other than those mentioned above, such as un-burnt bricks, bamboos, mud, grass, reeds, thatch, loosely packed stones, etc. are treated as kutcha house.

<u>Semi -Pucca house</u>: A house that has fixed walls made up of pucca material but roof is made up of the material other than those used for pucca house.

Others: The houses, which are not covered by the types mentioned above, are to be treated as of 'others' type.

		Section .	A:						
	Applicant 1		amily Informatio	n					
1.	Applicant's Name:			Gender: Male	Female				
2.	Applicant NADRA NIC No.		-		-				
3.	Marital Status Single	Married	Divorce	d					
4.	Date of Birth:Age :_		Nationality						
	Place of Birth (Name of City, Co	ountry)							
	Domicile (District Name):								
6.	6. Permanent Address:								
8.	Total Members in the Family:								
9.	Total Family Members currently	y living with you	ı: Total: Ma	le: Female:	<u>:</u>				
10.	Total Number of Brothers/Siste	rs married Total	:Br	othersSiste	rs				
S #	Name of Family Member (s)	Relationship	Marital Status	Remarks	S**				
1									
2									
3									
4									
5									
6									
7									

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

25. Marriage Relationship: Combined

26. Professionals Status: Working

		Details of Si	blings Studying including the appl	icant 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						
	Total Fees & 7	Tuition Charges	S			
14 If 15	(dd-mm-yy) Professional s answer is Empl . Name of Com	tatus: Employo oyed complete pany/Employe	Deceased (if deceased pl		e date of demise	
17	. Tel (Off):		Mobile:			
19	Designation &	c Grade (BPS/	SPS/PTC etc):			
20	. Total Gross M	Ionthly Income	e (Salary/ Pension/Others):		-	
21	. Total Net Mo	nthly Take Hor	me Income (Salary/ Pension/Other	s):		
22	. Previous Occi	upation (if appl	icable):			
23	. Total Annual	Income:	NTN_			
24	. Mother's Sta	tus: : Alive [Deceased			
	(if deceased p	lease mentione	d the date of demise (dd-mm-yy)_)		

Separated/Divorced

Not Working

27. Name: Relationship: 28. Address:								
29	Tel (Off/Res)	Mobile	e No		_NIC no		
30	Occupation _							
31	1. Designation_	nployer						
32	2. Total Month	ly Gross Incom	e (Salary/ P	Pension/Otho	ers)			
33	3. Total Net Mo	onthly Take Ho	me Income	(Salary/Per	nsion/Oth	ers):		
34	1. Total Net A	Annual Income	<u> </u>	44.	Monthly	Financial Su	pport Availal	ole from
	supporting p	erson to Applic	ant in Pak F	Rs				
Ass	set Income (on	monthly basis)		_			
	Incon	ne Source	Father	Mother	Spouse	Self	Other	Total
	Property F	Rent						
	Land Leas	se						
	Bank Dep	osits*						
	Shares / S	ecurities*						
	Other (Spe	ecify)						
	Total							
or so	ources with ann	nual income ret	ırns, kindly	report the n	nonthly in	come earned		
		g Members in I	_	_	-			
		family member	•					
		mily Members		C				
#	Family Member Name	Relationship	Family Mer	_	nization [ame	Designation	Monthly Gross	**Rema
			.				Pay/Earning	
1								
1 2 3								

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

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*** 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

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			(300.10)		1 uji Zuming
1					
2					
3					
4					
5	Applicant Monthly Gross (Sec. 11)	Pay/Earning			
6	Applicant Monthly Net (T	'ake home)			
	Pay/Earning (Sec. 12)				
	Total Monthly Incom	e in Pak Rupees			
	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	Structure: Pucca House Kutcha House Semi Pucca House Others						
(Detail available at Page 1 d	(Detail available at Page 1 &2)						
Status: Rented	Self or Family owned Empl	loyer / Govt Owned					
Rent Payment: Self	Employer/Govt	Others					
Total Size of the House in S	Sq. ftCovered	Area in Sq. ft					

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S #	Accommodation Location /Address	Number Of Bed Rooms	Number Of Air conditioners	Accommodation Monthly Rent	Accommodation Annual Rent
48	Total Accommodatio	1-2	Nill		

Any other house/flat owned by the Parents/Guardian (if yes please specify with location an	d
size)	

49. Utilities Expenditures

	Last Month Utilities Paid									
Ī	Telephone	Electricity	Gas	Wa	Water					
	Average of Last Six Months (Per Month Utilities Charges)									
S #	Telephone	Electricity	Gas	Water	Т	'otal				
49										

xpenditures

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

	Section B:								
	Cumulative information of Self, Parents and Guardian Assets								
	Assets (with current market value)								
52.	Does the family own any Transp	oort? 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. 53. Area and location of Land(s)/Plot(s) owned								
				Cultivabl	e Agricultur				

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

54. 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)						
	Total						

Section C: Financial arrangements for current year

55. A	Any source of financing other than this scholarship (Please specify)
56. I	How were the admission /first semester charges paid?

	China	Embassy	Fund	Scho	larship	Ap	plication	Form
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Section D:
Applicant Educational Record

Level of Study	Name of the Institute	*Address of the Institute	Period(Sta rt & End Date)	Per Month Fee	Division/ GPA/ Grade
Bachelors					
Intermediate					
Higher Secondary					
Secondary					
Primary					
* At least the name of	of the City is required in the fie	old		·	·

* At le	east the name of the Ci	ity is required in the	e field.		
57	7. Have you ever awa	rded any other sc	holarship before	e: Yes 🗌 N	No [
yes fill	the details of scholars	ships & attach docu	imentary proof o	f the scholarsh	ips)

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

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

UNDERTAKING

(If

- 1. 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 as well as my admission. 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.
- 2. University of Peshawar reserves the right to use information given in this form for verification and other purposes.

Date:	Date:	
Date: Parents / Guardian Signature	 Applicant Signature:	

For Department/Institutes

		uments in order? Yes	☐ No						
	The notices furnished to the applicant for furnishing of required documentation S # Notice Date Document Name Missing Remarks								
ο#	Notice Date	Document Name Wissing	Submission Date	Remarks					
1									
3									
4									
	10 1								
Additio	onal Remarks								
-	Date	Department N	Jame Sig	gnature Head of Department					

PRESCRIBED INCOME CERTIFICATE FORMATS

All applicants are required to provide Income Certificate. This income statement document should be on stamp paper as per the following prescribed formats.

- 1. Farmer
- 2. Driver
- 3. Shop Keeper

Income Certificate for Driver

I Mrs/o Mr	Father / Guardian of Mr	am a
driver by profession. I am dr	iving a vehicle on salary having vehicle registration #	
This vehicle belongs to Mr.	s/o Mr.	bearing CNIC #
	Further details of the vehicle are as follows.	
I use route / area		
for driving my vehicle and this	certificate is signed by the president of drivers union (if a	ny). Total income
of my family from this source	is Pak Rs/ month and Pak Rs	
have attached registration copy	and pictures of my vehicle with this certificate.	
Furthermore I reconfirm on o	ath that above information are correct and has been prov	ided with the best
	y concealment of information in the above statements: any	
be taken against me / scholarsl		
Vehicle Owner:		
Name:		
	-	
CNIC #:	_	
C: on otymo.		
Signature:		
Mobile #:		

Income Certificate for Farmer

I Mr	s/o Mr	Father /	Guardian of Mr	am a
farmer by professio	n. I have		Guardian of Mr. (size) land for cultivation which is	located in
area of				
I cultivate		/ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	crops / see	ds on my
			k Rs/ per year. I have	
authorities.	and the verifica	tion / registration fro	om the Patwari office or other conce	erned land
	found concealm	ent of information in	are correct and has been provided win the above statements: any legal action	
Parent / Land Own	er:	Witness:	Witness:	
Name:		Name:	Name:	
CNIC #:		CNIC #:	CNIC #:	
Signature:		Signature:	Signature:	
Mobile #:		Mobile #:	Mobile #:	

Income Certificate for Shopkeeper

		s/o Mression as per the fo	is Father / Guardi ollowing details.	ian of Mr	am
Our sho	o deals in				kinds of

materials on resale / wholesa	-	/ per month and Pak Rs. f the shop.
	concealment of information in	correct and has been provided with the best the above statements: any legal action may
Parent / Shopkeeper:	Witness:	Witness:
Name:	Name:	Name:
CNIC #:	CNIC #:	CNIC #:
Signature:	Signature:	Signature: