



# FORMAN CHRISTIAN COLLEGE (A CHARTERED UNIVERSITY)

## FINANCIAL AID FORM 2020-21

Paste your  
Photograph  
Here

Please submit this form to Financial Aid office room #15 Ahmed Saeed Administration Building along with all relevant required documents. Form with incomplete documents will not be processed.

Roll No:

Full Name:

Program:

Gender

T-Score/ CGPA

Major

Religion

Annual Tuition Fee

Parent/ Guardian Name:

Parent/ Guardian Profession:

Business Name/ Job Title:

Job/ Business Address:

Residential Permanent Address:

Residential Temporary Address:

District of Permanent Residence:

Hostel Address (If any):

Telephone No. (Home):

Telephone No. (Office):

Student's Mobile No.:

Father/ Guardian Mobile No.:

Student E-Mail:

Student Facebook ID:

### Academic Information

Latest Qualification:

Name & Location of Last Institute:

Year of Completion:

Grade/ Marks Obtained:

Explain your Aims and Goals (25-30 words limit):

**Personal and Family Information**

Do you live in a joint family system?

Yes  No

Total No. of Family Members:

No. of relatives living in the house:

| Name of member | Relationship | Marital Status/Age | Working/ Studying | Qualification | National/ Overseas |
|----------------|--------------|--------------------|-------------------|---------------|--------------------|
|                |              |                    |                   |               |                    |
|                |              |                    |                   |               |                    |
|                |              |                    |                   |               |                    |
|                |              |                    |                   |               |                    |
|                |              |                    |                   |               |                    |
|                |              |                    |                   |               |                    |

Use extra sheet with the same format (if required)

**Sibling's Education Information**

| Name | Class | Institution Name | Annual Tuition Fee | Annual Fee Concession (If any) |
|------|-------|------------------|--------------------|--------------------------------|
|      |       |                  |                    |                                |
|      |       |                  |                    |                                |
|      |       |                  |                    |                                |
|      |       |                  |                    |                                |

Use additional sheet with the same format (if required)

### Financial Information

| Name of Member | Relationship | Business Name/ Job Title | Institution/<br>Organization | Annual Gross<br>Income |
|----------------|--------------|--------------------------|------------------------------|------------------------|
|                |              |                          |                              |                        |
|                |              |                          |                              |                        |
|                |              |                          |                              |                        |
|                |              |                          |                              |                        |

Use additional sheet with the same format (if required)

Do you have Agricultural Land? Yes  No  (If yes give details)

|   |  |                   |  |
|---|--|-------------------|--|
| Agriculture Land Size:                      |  | Crops Cultivated: |  |
| Location of Land:                           |  |                   |  |
| Annual Gross Income from Agricultural Land: |  |                   |  |

Rental Property Income: Yes  No  (If yes give details)

|                             |  |                |  |
|-----------------------------|--|----------------|--|
| Size of Property:           |  | No. of Floors: |  |
| Annual Gross Rental Income: |  |                |  |

Do you have Cattle? Yes  No  (If yes give details)

|                                  |  |                 |  |
|----------------------------------|--|-----------------|--|
| No. of cattle:                   |  | Type of cattle: |  |
| Annual Gross Income from cattle: |  |                 |  |

Stocks/ Bonds: Yes  No  (If yes give details)

|                     |  |                      |  |
|---------------------|--|----------------------|--|
| Total Sum of Amount |  | Annual Yield Amount: |  |
|---------------------|--|----------------------|--|

Do you have Savings: Yes  No  (If yes give details)

|                     |  |                      |  |
|---------------------|--|----------------------|--|
| Total Sum of Amount |  | Annual Yield Amount: |  |
|---------------------|--|----------------------|--|

|                                |  |
|--------------------------------|--|
| Other Assets (Please specify): |  |
|--------------------------------|--|

### Family's Living Standard

Type of Accommodation:

|                                     |
|-------------------------------------|
| Owned/ Rented/ Provided by Employer |
|-------------------------------------|

Location (Address)/ Nearest Landmark:

|  |
|--|
|  |
|--|

Size of Accommodation:

|  |
|--|
|  |
|--|

No. of Floors:

|  |
|--|
|  |
|--|

No. of Rooms:

|  |
|--|
|  |
|--|

No. of Air Conditioners:

|  |
|--|
|  |
|--|

### Type of Transport

|  |                   |  |                 |  |
|--|-------------------|--|-----------------|--|
| Car: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes       | No. of Cars       |  | Model:          |  |
|  | Registration#     |  | Ownership Name: |  |
| Motorcycle Yes <input type="checkbox"/> No <input type="checkbox"/> If yes | No. of Motorcycle |  | Model:          |  |
|  | Registration#     |  | Ownership Name: |  |
| Other (Please specify):  |                   |  |                 |  |

Use additional sheet with the same format (if required)

## Annual Living Expenses of the Family

Annual Food/kitchen Maintenance

Annual Telephone/Mobile Expenses:

Annual Travel Expenses:

Annual Electricity Expenses:

Annual House Maintenance Expenses:

Annual Educational Expenses:

Annual Clothing Expenses:

Annual House Rent Paid (If Applicable):

Annual Medical Expenses:

Annual Sui Gas Expenses:

Annual Vehicle Expenses:

Others Expenses:

## References

Student reference is not acceptable

### Reference # 1

Please give name of reference

**Neighbour:**

Address:

Contact No.:

Profession:

### Reference # 3

Please give name of reference

**Relative:**

Address:

Contact No.:

Profession:

### Reference # 2

Please give name of reference

**Family Friend:**

Address:

Contact No.:

Profession:

### Reference # 4

Please give name of reference

**Business/Workplace:**

Address:

Contact No.:

Profession:

Write an ESSAY of at least 50 words giving reasons for why are you applying for financial aid and also give two separate valid reasons

Reason No.1:

Reason No.2:

**Mention your family contribution towards your tuition fee.  
CONTRIBUTION IS COMPULSORY**

Enter amount in rupees per month  Rs.

Do you receive any other scholarship? Yes  No  If yes  Rs.

Has any of your blood relations studied at Forman Christian College? Yes  No

**If your financial aid is funded from zakat, would you be willing to receive such funds for your fee?**

- I am willing to receive zakat for financial aid
- I prefer to receive donor funds but I am willing to receive zakat if other funds are not available
- I will not receive zakat under any circumstance, even if this means that I will not receive any other financial aid

### Declaration

I hereby declare that all the information provided in this financial aid form 2020-21 is true and accurate to the best of my knowledge. I understand and acknowledge that if any of the information provided in this form is found false or inaccurate or if it is found that there is any intentional concealment of facts then I would become ineligible for Financial Aid during my entire tenure at FCC and also a penalty of Rs.10, 000/- would be imposed and charged to my tuition fee account. Furthermore, financial aid given to me (if any) would also be reversed. Other than this I agree to surrender the Security Deposits (General and Library) to be adjusted against the allocated Financial Aid (if provided) at the time of the completion of degree requirements/college left status. Forman Christian College (A chartered University) reserves the right to use information given in this form for verification and other purposes.

I agree to the Terms and Conditions of Financial Aid Office, Forman Christian College. I certify that I have completed this application honestly and to the best of my ability.

**Applicant's Signature**

Date:



**Parent/ Guardian's Signature**

Date: