



Program / Session \_\_\_\_\_

Name of Student \_\_\_\_\_

Recent Colored  
Photograph

**IMPORTANT NOTE:**

- While filling the form please visit. <http://wecuw.edu.pk/sfao/wsf/apply> for instructions.

1. Student CNIC No  -
2. Date of Birth Day  Month  Year
3. Name of the Educational Institution last attended / Certificate / Grade / Year \_\_\_\_\_
4. Father's / Guardian's Name \_\_\_\_\_
5. Father's / Guardian's Occupation \_\_\_\_\_

| Service  | Name of Company / Employer | Year of Joining         | Designation       | Take home salary |
|----------|----------------------------|-------------------------|-------------------|------------------|
| Business | Nature of Business         |                         |                   | Yearly Income    |
| Retired  | Date of Retirement         | Organization / Business | Last Salary Drawn | Gratuity Receive |

6. Business / Service address of Father /Guardian \_\_\_\_\_  
Tel: \_\_\_\_\_

7. Correspondence Address \_\_\_\_\_  
Tel: \_\_\_\_\_

8. Permanent Residential Address \_\_\_\_\_  
Tel: \_\_\_\_\_

9. Email Address (self) \_\_\_\_\_ Mobile No \_\_\_\_\_  
(Self) (Guardian)

10. Are you a ward of POF Employee? Yes  No

11. Type of Accommodation (Please tick / write in appropriate row)

| Type of Accommodation | Rented | Owned | Provided by Employer | No. of Room | Total Area of Plot (Sq. yards) | Total Covered Area (Sq. yards) |
|-----------------------|--------|-------|----------------------|-------------|--------------------------------|--------------------------------|
| Flat                  |        |       |                      |             |                                |                                |
| Townhouse             |        |       |                      |             |                                |                                |
| Bungalow              |        |       |                      |             |                                |                                |
| Other                 |        |       |                      |             |                                |                                |

12. Total members residing with the family: \_\_\_\_\_

13. Particulars of all immediate family members (*whether or not residing with the family*)

| Name | Age | Relationship with Student | Marital Status | Occupation | Designation / Nature of Business | Institution / Organization |
|------|-----|---------------------------|----------------|------------|----------------------------------|----------------------------|
|      |     |                           |                |            |                                  |                            |
|      |     |                           |                |            |                                  |                            |
|      |     |                           |                |            |                                  |                            |

**(Use extra Sheet if required)**

14. Are any of the family members other than parents/guardian supporting your educational expenses at WEC?

Yes  No

If yes, please specify: amount Rs. \_\_\_\_\_ Relationship \_\_\_\_\_

15. Please give details of the following household items that exist in your house:

|                        | Make and Model | Yes / No | No. of Item | *CMV Rs |
|------------------------|----------------|----------|-------------|---------|
| i) Car                 |                |          |             |         |
| ii) Motorcycle         |                |          |             |         |
| iii) Air Conditioner s |                |          |             |         |
| iv) Televisions        |                |          |             |         |

16. **Details of Annual Family Income** (*Please indicate income of all family members*):

|                                     | Father Rs | Mother Rs | Other Member Rs | Other Member Rs |
|-------------------------------------|-----------|-----------|-----------------|-----------------|
| a. <b>Income from (All Sources)</b> |           |           |                 |                 |
| b. <b>Pension</b>                   |           |           |                 |                 |

17. **Details of Annual Family Expenditures** (*Please provide appropriate evidences for expenses incurred*)

a. **House Hold Expenses**

|  |  |
|--|--|
| House Rent   |  |
| Maintenance of House   |  |
| Utilities:   |  |
| Electricity  |  |
| Telephone / Mobile   |  |
| Gas  |  |
| Other Expenses ( <i>please provide details in attachment</i> ) |  |
| Total House Hold Expense                                       |  |

b. **Educational expenses (exclude yourself)**

|   | Name | Institution | Level / Class | Expense per month |
|---|------|-------------|---------------|-------------------|
| <i>For Siblings / Tution</i><br>(give particular of each student) |      |             |               |                   |
| Books, Stationary, Uniform and other exp                          |      |             |               |                   |
| Total   |      |             |               |                   |
| Total Educational Expenses  |      |             |               |                   |

Grand Total (a+b)

18. Give details of last three months utility bills.

*Electricity* *Gas*

**DECLARATION**

I \_\_\_\_\_ S/O or D/O \_\_\_\_\_ holder of CNIC No \_\_\_\_\_ do hereby declare that the information provided in this application is true and correct to the best of my knowledge and I understand that **withholding/misleading** information or any **false statement** on my behalf will make me disqualified for assistance and **cancellation of admission at any stage**. It is also declared that I am not in receipt of any financial assistance from any public or private source.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

I \_\_\_\_\_ S/O or D/O \_\_\_\_\_ holder of CNIC No \_\_\_\_\_ do **solemnly affirm** that the information furnished in the application above is hereby verified and confirmed to be true and correct.

Signature of the Applicant's Father/ Guardian \_\_\_\_\_

Date \_\_\_\_\_

**IMPORTANT**

*The WEC Student Loan Endowment Fund program is aimed at assisting students who are in genuine need and are unable to meet their educational expense. Before applying, it must be realized that only a limited amount is available for providing this facility. Applications in large numbers may not only delay award process but some genuine deserving cases may not be able to avail this opportunity.*