

Form Issue Date:

Form Submission Date:



Habib Education Trust
Financial Assistance Programme
Application Form

For the Year _____

Serial No:

Picture

All financial information and documents submitted to the Habib Education Trust (HET) office will be treated as confidential. Please note the submission of an application does not guarantee an award of financial assistance by HET. Grant of financial assistance will be according to demonstrated need, subject to verification of information provided and as per the policies.

The HET reserves the right to verify applicant information from a recognized source of a third party or request additional documents or explanation of information or circumstances.

Failure to provide complete or correct information or concealment of information will result in withdrawal or denial of financial assistance. The HET reserves the right to take strict disciplinary action against such applicant or students.

HET reserves the right to send the representative to your home who will interview the resident and take the pictures of your premises. You are required to fully cooperate with him /her.

Checklist of financial assistance application documents.

Note: Submission of all the documents listed below is mandatory, please attach all documents as per sequence in this checklist.

- i. Last three-month salary slip of all employed family members.
- ii. If unemployed attached related documents.
- iii. Last three years bank statement of self and all employed family members (if applicable).
- iv. Documentary evidence of all assets or property owned, including saving certificates, bonds shares, investments (if applicable).
- v. Copy of scholarship(s) or funding offers received for self and family members for the relevant year and /or future scholarship or funding offer letters (if applicable).
- vi. Last three years tax return statements of all employed family members. (if applicable).
- vii. Copy of house / shop rent agreements (if applicable).
- viii. Copy of last tuition fees receipts of all family members attending educational institutes.
- ix. Copy of last three month household utility bills-electricity, gas, telephone, water.
- x. Copies of last three month medical bills and expense receipt (if applicable).
- xi. Copies of CNIC of parents, guardians, other employed family member(s).
- xii. Copy of your CNIC / B-form / FRC
- xiii. Any other documents.
- xiv. Please specify.

HABIB EDUCATION TRUST
UBL, City Branch, 2nd Floor, I.I Chundrigar, Road, Karachi
Phone: 32467237 & 32418764

PERSONAL INFORMATION

| | | |
|----------------------------------|--|--|
| School Name (Please tick one) | <input type="checkbox"/> Habib Public School | <input type="checkbox"/> Habib Girls School |
| Student's Name: | Father's Name: | |
| Class (concession applied for): | G.R. # | |
| Home Address: | | |
| Office Address: | | |
| Office Phone: | Home Phone: | Mobile: |
| Email Address: | | |
| Parent's current marital status: | <input type="checkbox"/> Married | <input type="checkbox"/> Separated / Divorced |
| | <input type="checkbox"/> Mother living / Father deceased | <input type="checkbox"/> Father living / Mother deceased |

EDUCATIONAL PERFORMANCE (attach copy of last result)

| | |
|---|------------------|
| Previous class: | Grade: |
| Percentage: | CNIC / B-Form #: |
| Co-curricular / Literacy / Sports Achievements: | |

ASSETS OWNED

| Asset type (Immovable Asset) | Total Area (square feet) | Address | Current Market Value (PKR) |
|-----------------------------------|--------------------------|----------------------------|----------------------------|
| i. Residential House | | | |
| ii. Other land or building | | | |
| Asset type (Liquid/Movable Asset) | Description of Asset | Current Market Value (PKR) | |
| iii. Saving Certificates / shares | | | |
| iv. Other assets / investment | | | |
| v. Jewelry (gold / silver) | | | |
| vi. Cash | | | |
| vii. Tradable assets/Inventory | | | |

| | | | |
|-------------------------|------------------------------------|-------------------------------------|---|
| Current residence type: | <input type="checkbox"/> Rented | <input type="checkbox"/> Owned | <input type="checkbox"/> Provided by Employer |
| Residence type: | <input type="checkbox"/> Apartment | <input type="checkbox"/> Town house | <input type="checkbox"/> Bungalow |

| Vehicle Type | Model | Number / Quantity | Current Market Value (PKR) |
|-------------------|-------|-------------------|----------------------------|
| i. Car | | | |
| ii. Motorcycle | | | |
| Other: | | | |
| Total Asset Value | | | |

FAMILY & INCOME DETAILS

| | | | |
|------------------------------|---------------------------------|-------------------------------|-----|
| Total No. of Family Members: | | Total Income Earning Members: | |
| Family Member | Occupation/Institution / Source | Monthly Income | |
| Father: | | | |
| Mother: | | | |
| Other Source of Income: | | | |
| | | Total Income: | Rs. |

(زکوٰۃ جائزہ فارم)

نوٹ:

مندرجہ زکوٰۃ فارم وہ پُر کریں جو زکوٰۃ سے لینا چاہتے ہیں۔

درخواست گزار کا نام _____ ولدیت/زوجیت _____
 عمر _____ پتہ _____
 شناختی کارڈ نمبر _____ فون نمبر _____ درخواست نمبر _____

استحقاق کے لیے درج ذیل پانچ چیزوں کا معلوم کرنا ضروری ہے

| نمبر شمار | اشیاء | مالیت | ہے یا نہیں |
|-----------|---|-------|------------|
| 1 | سونا | | |
| 2 | چاندی | | |
| 3 | نقد رقم، کرنسی، بانڈ، وغیرہ | | |
| 4 | تجارتی سامان | | |
| 5 | ضرورت سے زائد سامان مثلاً ٹی وی | | |
| 6 | 1 تا 5 کی کل مالیت | | |
| 7 | قرض | | |
| 8 | اب 1 تا 5 کی کل مالیت میں سے منہا کیا جائے: | | |

| | | |
|--------------------------|--------------------------|--------------------------|
| سید | ہے | نہیں |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| مستحق ہے | مستحق نہیں ہے | |
| <input type="checkbox"/> | <input type="checkbox"/> | |
| درخواست گزار کی کیفیت | | |

وکالت نامہ

میں مسماة / مسماة _____ ولد / زوجہ _____

مسلمان عاقل بالغ اقرار کرتا ہوں کہ میں سید یا ہاشمی نہیں اور شرعی قاعدے کی رو سے زکوٰۃ لینے کا / کی مستحق ہوں، لہذا میں حبیب ایجوکیشن ٹرسٹ / حبیب پبلک اسکول / حبیب گرلز اسکول کی انتظامیہ اور نمائندوں کو اس بات کا اختیار دیتا / دیتی ہوں کہ جب تک میں مستحق زکوٰۃ ہوں، اس وقت تک حبیب ایجوکیشن ٹرسٹ / حبیب پبلک اسکول / حبیب گرلز اسکول کی انتظامیہ خود یا اس کے نمائندے میری طرف سے زکوٰۃ و صدقات کی رقم یا اشیاء وصول کریں اور اسے حسب صوابدید میری یا میرے علاوہ دیگر مستحق افراد کے علاج معالجہ، پانی وغیرہ اور دیگر ضروریات پر خرچ کریں یا حبیب ایجوکیشن ٹرسٹ / حبیب پبلک اسکول / حبیب گرلز اسکول کی ملکیت میں دیدیں۔

مستحق کے دستخط: _____

دستخط تصدیق کنندہ (1): _____

تصدیق کنندہ سے تعلق (1): _____

دستخط تصدیق کنندہ (2): _____

تصدیق کنندہ سے تعلق (2): _____

تاریخ: _____

نوٹ: تصدیق کنندان کے شناختی کارڈ کی کاپی زکوٰۃ فارم کے ساتھ منسلک کیجئے۔



Recipient Copy

HABIB EDUCATION TRUST
UBL City Branch 2nd Floor I.I Chundrigar Road, Karachi.
Phone 32467237 & 32418764

Fee Concession Form Receipt

Serial # _____

Date _____

Received the form of (Student Name) _____

S/o. / Do. _____

Class _____ Section _____

Please preserve the receipt carefully till finalization of the fee concession

FAP OFFICER



Parent Copy

HABIB EDUCATION TRUST
UBL City Branch 2nd Floor I.I Chundrigar Road, Karachi.
Phone 32467237 & 32418764

Fee Concession Form Receipt

Serial # _____

Date _____

Received the form of (Student Name) _____

S/o. / Do. _____

Class _____ Section _____

Please preserve the receipt carefully till finalization of the fee concession

FAP OFFICER

Any other assets / Income generation assets

Currently receiving any financial assistance from school: Yes No (Attach fee voucher of student)

Nature of assistance required from HET: Grant Loan Loan + Grant (Loan %, Grant%)

Repayment terms in case loan option:

Reason for applying financial assistance:

Incase Habib Education Trust is unable to meet the requirement for assistance how do you propose to support the education of your child in the school?

EXPENSES DETAILS

Full Fee Amount:

Transport expenses:

How does the students come to school: School bus Car/Motorcycle Public Transport

Number of school going children (only siblings) fill the details below:

| S # | Name of School / Institutions | Tuition Fees (Per Month) | Transport Fees (Per Month) |
|-----|-------------------------------|--------------------------|----------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |

Show average monthly expenses of the family against your income with breakdown:
(Attach Utility Bills, rent receipt etc.)

| S # | Particulars | Expenses |
|-------|-----------------------------|----------|
| 1. | House rent (If rented) | Rs. |
| 2. | Grocery | Rs. |
| 3. | Electricity Bill | Rs. |
| 4. | Gas Bill | Rs. |
| 5. | Telephone Bill | Rs. |
| 6. | School Fees of all children | Rs. |
| 7. | Van fees of all children | Rs. |
| 8. | Fuel Charges | Rs. |
| 9. | TV Cable Charges | Rs. |
| 10. | Internet Charges | Rs. |
| 11. | Mobile Charges | Rs. |
| 12. | Others (Specify) | Rs. |
| TOTAL | | Rs. |

TERMS AND CONDITIONS

1. Incomplete form, false declaration, concealment of facts will result in outright rejection of application.
2. Forms with support documents, should be returned to the office within 10 days, forms will not be accepted thereafter.
3. The decision of trust shall be final and binding on the applicant.
4. The trust reserves the right to reject any application without assigning any reason.
5. In case of applying loan option parents / guardian / student shall ensure the repayment of the loan as per the terms agreed.
6. Students need to maintain minimum academic Grade C throughout the concession period. Falling below the requirement of Grade C may result cancelation of fee concession.
7. Disciplinary action takes by the school of suspension of student due to any misconduct may result in cancellation of fee concession.
8. Photocopies of the documents as mentioned on page# 1 should be attached with the form.

UNDERTAKING

I, the undersigned, confirmed the final information contained in this form is true and correct; in case any information is found to be incorrect son / daughter will be disqualified from any financial assistance. I agree to abide by the term and conditions of the Habib Education Trust.

Parents / Guardian
(Name)

Signature

CNIC#

Form Submission Date