

## University of Baltistan, Skardu

## **Scholarships Application Form**

Applicant's Profile Name:		Registration No:		
Father's Name:		CNIC No:		
Semester: Program:		Department:		
CGPA Socio	emic Performance Indicator or percentage marks in the last -Economic Indicator:			
	dian's Name: lian's Monthly Income in PKR		_	uardian
Month	nly Family Income (including gua			ites to your
studie S. No	Relation		Monthly gross income	
	Father			
2.	Mother			
4.	Self			
5.	Other (specify) e.g., brother/sis			
	Total Family Income			
6.	Total Family			
Direct Dependents of the Guardian:				
S. No	. Relationship with guardian	Number or (mark if not applicable)		Vocation/ Profession
1.	Father			
	Mother			
	Spouse			
	Son (s)			
	Daughter (s)			
6.	Others (please specify)			
7.				
8.	M-4-1 dd4-			
Daele	Total dependents			
	ration: olemnly state that to the best of	my know	ledge, the i	nformation given
in this application is true. DateSignature				

## Documents to be attached:

- a) Result/Transcript of the last examination
- b) Income Certificate of the guardian by the Employer or Chairman Union Council