IBA – SINDH FOUNDATION PROGRAM – 2015

APPLICATION FORM

Note: IF YOU HAVE ALREADY FILLED–UP AN ONLINE APPLICATION FORM, THAN THERE IS NO NEED TO SUBMIT THE PRINTED VERSION AGAIN.

ONLINE FORM : https://talenthunt.iba.edu.pk

LAST DATE OF SUBMISSION: NOVEMBER 16, 2014

ASSESSMENT TEST: NOVEMBER 30, 2014

RESULT OF ASSESSMENT TEST: DECEMBER 04, 2014

INTERVIEWS: DECEMBER 12, 2014

FINAL RESULT: DECEMBER 15, 2014

For Inquires contact us at:
Dr. Zeenat Ismail – Coordinator- NTHP/ SFP/STHP
Syed Rizwan A. Bukhari – Senior Executive

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Fax: +92(21) 99261807 or 99261508
Email: foundation@iba.edu.pk
Website: http://sfp.iba.edu.pk

Mailing Address:
Coordinator – NTHP/SFP/STHP
IBA Main Campus,
Room No. 10(A), Abdul Razzaq Tabba Academic
Building, University Enclave,
University Road Karachi -75270
GUIDELINES FOR FILLING OUT THE APPLICATION FORM

a) Read the general information thoroughly, which will enable you to complete the application form?

b) Attach the following as supporting documents along with your application:

1) Copies of Computerized NIC's of all family members

2) Salary slip / Income certificate (or Pension slip) of all earning family members *

3) Bank statements for last six month of all family members having an account.

4) Income tax returns of all earning family members for last year.

5) Fee bill and any concession document from the last institution you attended.

6) Utility bills last six month;
   a) Electricity _____
   b) Telephone _____
   c) Gas _____
   d) Water _____

7) Saving certificates, bonds, shares, investments, CDC account statement.

8) Property ownership documents, including agriculture land, plots and houses.

9) Rent agreement (if applicable)

10) Loan document(s), including credit card bills and bank loan statements.

11) Medical bills / expenditure related documents.

12) Latest fee challans / Fee concession (scholarship / loan) document(s) of sibling(s).

13) Wealth statement for all family members for last year.

14) Your domicile certificates.

15) Any other relevant document(s) necessary to support your application.

16) Statement of purpose.

17) Educational documents (F.A./ F.Sc/ H.Sc.)

* Note: An income certificate is the document that shows monthly/annual income. If your parents/guardian is salaried, an original copy of a pay slip should be attached, otherwise if your parents/guardian owns a business they should submit Bank Statement for the last six months. If parents/guardian does not fall in either of the above two categories (that is salaried employee or business man) they should submit an undertaking on a stamp paper/affidavit (of Rs.20) stating their income and with relevant details.

GENERAL INFORMATION

a) Submit the complete IBA SINDH FOUNDATION APPLICATION FORM to the Coordinator - IBA Main Campus, Room No. 10(A), Abdul Razzaq Tabba Academic Building, University Enclave, University Road Karachi, Latest by NOVEMBER 16, 2014

b) Make photocopies of the application form when it reaches you, and keep the original in a safe place. Fill out the photocopies first and when everything is clear and final, copy out the same on the original.

c) Read the form very carefully before filling it to be able to get a clear picture of the requirements.

d) Fill in the form in black ink with a ballpoint pen and write in block letters.

TIPS FOR COMPLETING APPLICATION FORM

a) Furnish factual, comprehensive and authentic information in the form.

b) Provide educational information in chronological order.

c) Carefully note down your enrollment number and remember to use it correctly during future correspondence.

d) Answer all questions. Those not applicable should be marked N/A. All required documents (wherever applicable) listed below are to be attached.

PLEASE AVOID THE FOLLOWING

X Provide vague / incomplete information.
X Overwriting / scratching information on the form.
X Submit the application with documents in wrong order without folder.
X Leaving any question unanswered.
**PERSONAL DETAILS**: (Please use BLOCK LETTERS to fill the form)

Forms with incomplete information will not be processed.

<table>
<thead>
<tr>
<th>Name:</th>
<th>Guardian’s Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father’s Name:</td>
<td>CNIC Card # (Student):</td>
</tr>
<tr>
<td>Domicile:</td>
<td>(If not available, refer the B-Form)</td>
</tr>
</tbody>
</table>
| Father’s / Guardian’s CNIC #: | Date of Birth _____/_____/_____
| (Provide a copy of NIC)    | dd / mm / yyyy        |

**Postal Address**: (All future correspondence will be made on this address)

<table>
<thead>
<tr>
<th>TEHSIL:</th>
<th>DISTRICT:</th>
<th>CITY:</th>
<th>PROVINCE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PHONE #:</td>
<td>/</td>
<td>Mobile #:</td>
</tr>
<tr>
<td></td>
<td>(City code)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Residential Address**:

<table>
<thead>
<tr>
<th>TEHSIL:</th>
<th>DISTRICT:</th>
<th>CITY:</th>
<th>PROVINCE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Phone #:</td>
<td>/</td>
<td>Mobile #:</td>
</tr>
<tr>
<td></td>
<td>(City code)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Email**:

**EDUCATIONAL DETAILS**:

Attach an attested copy of all the result cards/ Mark sheets with your application form.

<table>
<thead>
<tr>
<th>Matric (X)</th>
<th>Roll Number</th>
<th>Marks Obtained</th>
<th>Total Marks</th>
<th>Per. %</th>
<th>Passing Year / Month</th>
<th>School/ College Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSSC-Level -I (XI)</td>
<td></td>
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<td></td>
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<tr>
<td>HSSC-Level -II (XII)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stream of HSSC Level</td>
<td>Pre-Medical</td>
<td>Pre-Eng.</td>
<td>Gen. Sci.</td>
<td>Arts/Commerce</td>
<td>Other:</td>
<td></td>
</tr>
<tr>
<td>Name of Examination Board</td>
<td>Roll No.</td>
<td>(Last attended Examination)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Section B:

1. **Father’s / Guardian’s Name**

2. 

3. **Residential Address (if different from above):**

4. **Tel. # (Office) ** __________ **Cell Phone #** __________ **Fax #** __________ **Email** __________

5. **Present Occupation (Give full details)**

6. **Designation** ______________________ **Name of Company / Employer** ______________________

7. **Monthly Income Gross** __________ **Net** __________ **Pension (if retired)** __________

8. **Annual Income Gross** __________ **Net** __________

9. **Previous Occupation (if applicable)**

10. **Mother’s Name**

11. 

12. 

13. **Residential Address (if different from above):**

14. **Tel. # (Office) ** __________ **Cell Phone #** __________ **Fax #** __________ **Email** __________

15. **Present Occupation (Give full details)**

16. **Designation** ______________________ **Name of Company / Employer** ______________________

17. **Monthly Income Gross** __________ **Net** __________ **Pension (if retired)** __________

18. **Annual Income Gross** __________ **Net** __________

19. **Previous Occupation (if applicable)**

20. **Spouse’s Name**

21. 

22. **Residential Address (if different from above):**

23. **Tel. # (Office) ** __________ **Cell Phone #** __________ **Fax #** __________ **Email** __________

24. **Present Occupation (Give full details)**

25. **Designation** ______________________ **Name of Company / Employer** ______________________

26. **Monthly Income Gross** __________ **Net** __________

27. **Annual Income Gross** __________ **Net** __________
Section C: Family Assets / Properties and Liabilities

1. **Details of Assets / Properties (Please mention current market values in Rupees)**

<table>
<thead>
<tr>
<th>Value of Assets</th>
<th>Father</th>
<th>Mother</th>
<th>Spouse</th>
<th>Self</th>
<th>Brothers/Sisters/Children</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Land &amp; Building</td>
<td></td>
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<tr>
<td>Vehicle(s)</td>
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<td></td>
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<tr>
<td>Saving Accounts &amp; Deposits</td>
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</tr>
<tr>
<td>Investments</td>
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<tr>
<td>Others</td>
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<tr>
<td><strong>Total</strong></td>
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</tbody>
</table>

2. **Accommodation type:**
   - o Apartment
   - o Bungalow
   - o Town House

3. **Accommodation ownership:**
   - o Family Owned
   - o Rented

4. If owned, area of plot ____________ Constructed (Covered) area of the house ____________

5. **Locality of the house**

6. **Total number of rooms in house** ____________ **Number of bedrooms** ____________

7. **Number of Air Conditioners in house** ____________ **Number of Television**

8. **Number of cars owned by the family (with make and model)**

9. **Any other house or flat owned by the family:**
   - Yes ☐ No ☐
   If yes, please give details regarding location, size, rent, etc., on a separate sheet.

10. **Agricultural land owned by family:**
    - Yes ☐ No ☐
    If yes, please give details regarding location, size, rent, etc., on a separate sheet.

11. **Bank savings Rs.** ____________ **in the form of**

12. **Other investments Rs.** ____________ **in the form of**

13. **Any other property or plots:**
    - Yes ☐ No ☐
    If yes, please give details regarding location, size, rent, etc., on a separate sheet.

14. **Details of Liabilities (Please mention current market values in Rupees):**
   a) **Amount Outstanding**
   b) **Nature**
   c) **Repayment Schedule (Please give full details)**
   d) **Loan / Debt Maturity Date**
   e) **Reason for obtaining loan / debt**
### Section D: Family Income

1. **Family Income (Please attach supports and give full details in Rupees)**

<table>
<thead>
<tr>
<th>Average Monthly Income arising from:</th>
<th>Father</th>
<th>Mother</th>
<th>Spouse</th>
<th>Self</th>
<th>Brothers/Sisters/Children/Other Supporting hands</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Salary</td>
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<td>Business</td>
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<td>Land &amp; Building</td>
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<td>Saving Accounts &amp; Deposits</td>
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<tr>
<td>Total</td>
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</table>

2. **Annual agricultural income of family**

3. **Any other form of income from assets or otherwise**

4. **TOTAL FAMILY INCOME**

5. **Family Expenditure (Please attach supports and give full details in Rupees)**

<table>
<thead>
<tr>
<th>Dependent Family Members</th>
<th>Number of Siblings are Studying</th>
<th>Brothers/Sisters/Children/ Other Dependent Family Members</th>
<th>Age</th>
<th>Occupation (If working)</th>
<th>Name of Institution (If studying)</th>
<th>Fee (per month)</th>
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</table>

6. **In case of rented accommodation:**
   a) What is the annual rent Rs.___________
b) Is it paid by self / employer? (Strike out one)

7. **Utilities Expenditure (average of last six months bills)**
   - Telephone (or Mobile) Rs.___________
   - Electricity Rs.___________
   - Gas Rs.___________
   - Water Rs.___________

8. **House hold expenditure (monthly average) Rs.___________

9. **Education and transport expenses (monthly average) excluding the applicant’s.___________**
   - Tuition, Books & Stationery Rs.___________
   - Others (Please specify) Rs.___________

10. **Car’s Make Regn. No.___________ Monthly average Fuel Consumption Rs.___________ (details required)**

* Provide information about all cars/ motorcycles that your family possesses.
11. Taxes (Please specify)
   (I) Income Tax: Rs. __________________________
   (II) Property Tax: Rs. __________________________
   (III) Others (Please Specify): Rs. __________________________
   Licenses __________________________

12. Travel (In Pakistan and abroad during the past two years. Please give details with approximate expenditure per visit).

13. Any other expenditure (not mentioned above) __________________________

14. TOTAL EXPENDITURE __________________________

* Provide information about all cars / motorcycles that your family possesses.

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Section : E  Details of other Financial Assistance Arrangements

<table>
<thead>
<tr>
<th>Mode</th>
<th>Amount (In Rupees)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-financed / Other sources</td>
<td>__________________________</td>
</tr>
<tr>
<td>Financial assistance requested from IBA</td>
<td>__________________________</td>
</tr>
<tr>
<td>Total (Tuition fee only)</td>
<td>__________________________</td>
</tr>
</tbody>
</table>

Have you approached any other agency for assistance for your education i.e. banks, organizations, individual employer etc.

<table>
<thead>
<tr>
<th>Agency</th>
<th>Applied For</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
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</table>
Section E: Details of Other Financial Assistance Arrangements

UNDERTAKING

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. Further, 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 admission of the Applicant will be cancelled in case of 1st Semester students.
   - In case of existing students, immediate repayment of the total Scholarship along with a fine amounting to the Scholarship paid to the student will be required. Such a student will also be disqualified for applying for any further loan / scholarship.

2. We do hereby give our consent and permit a bonafide employee of IBA carrying authority letter to visit the residential / other location mentioned as part of our particulars for the purpose of physical verification of information provided by me in the financial assistance application form.

_________________________________________  ________________________________  ________________________________
Date                                             Signature of Parent / Guardian                           Signature of Applicant

References (Excluding Parents / Guardian):

1. Name ____________________________________________________________
   Relationship: _____________________________________________________
   Home Address ______________________________________________________
   Business Address _________________________________________________
   Contact Information: Residence: __________ Office: __________ Cell: ______
   NIC #: _________________________________ Signature: ______________________

2. Name ____________________________________________________________
   Relationship: _____________________________________________________
   Home Address ______________________________________________________
   Business Address _________________________________________________
   Contact Information: Residence: __________ Office: __________ Cell: ______
   NIC #: _________________________________ Signature: ______________________

SFP ASSESSMENT TEST CENTER:
Please choose one of the following centers for the SFP Assessment Test

☐ HYDERABAD (FOR HYDERABAD & MIRPURKHAS STUDENTS)

☐ MIRPURKHAS ( FOR SUKKUR & LARKANA STUDENTS )

Note: The final decision of the test center lies with the SFP Program Office
Statement of purpose

Why do you require financial aid?
What about your background and/or interest makes you competitive for this program (please be as specific as possible)? (Attach separate sheet if required)