



Capital University of Science & Technology

NEED BASE SCHOLARSHIP FORM

Name: _____ Ref No: _____

Father Name: _____ Occupation: _____

Present Address : _____

Mobile: _____ Special Person: No Yes
(If yes please attach Disability certificate)

Accommodation Status and Utilities Expenditures:

Rented Self or Family owned Employer / Govt Owned

Last Three Months Utilities Bill Paid					
Electricity			Gas		

Details of Family Members:

Family Member Name	Relationship	Family Member occupation	Monthly Gross Pay/Earning

Educational Record:

Level of Study	Name of Institute	Division / Marks / CGPA / GPA	Percentage
Secondary			
Intermediate			
Bachelors/Others			

Statement of Purpose: (Explain reason for scholarship)

Documents to be attached:

- Last Paid Electricity and Gas Bills.
- Death certificate (In case the applicant is orphan).
- Disability certificate (Issued by Council for rehabilitation of disabled persons).

_____ **Date**

_____ **Applicant Signature**