



INDUS VALLEY SCHOOL OF ART AND ARCHITECTURE

STUDENT NAME : \_\_\_\_\_ CONTACT NO. \_\_\_\_\_

**APPLICATION FOR FINANCIAL ASSISTANCE / QARZ-E-HASNA**

**INSTRUCTIONS**

1. Please type or write legibly in block letters in pen or ball point.
2. Answer all questions. Those not applicable should be marked N/A. All required documents listed below are to be attached.

Tick if enclosed

- |   |                          |
|---|--------------------------|
| a. Parent's / Guardian's recent Salary Certificate from employer(s).  | <input type="checkbox"/> |
| b. Copy of last Income Tax assessment.  | <input type="checkbox"/> |
| c. Copy of last Wealth Return   | <input type="checkbox"/> |
| d. Utilities bills for recent 6 months  | <input type="checkbox"/> |
| e. Parent's / Guardian's Bank Statement for recent 6 months   | <input type="checkbox"/> |
| f. Details of investment / real estate owned by the family (include location, size & current market value). | <input type="checkbox"/> |
| g. Any other relevant documents necessary to support your application.<br>(please specify)                  | <input type="checkbox"/> |
3. Please return your completed form before **Thursday October 27, 2011** to the Accounts Office. Late applications will not be considered after this date.
  4. If any family member has availed Financial Assistance / Qarz-e-Hasna. Attach details.

**IMPORTANT**

- a. Applicants are reminded that it is their responsibility to submit a completed application, along with necessary supporting documentation. They should be fully aware of the family's financial status so that they are able to help the Financial Assistance Committee to make a fair assessment of their requirement.
- b. Foundation Year students and students of all other semesters, whose SGPA is below 2.30 and 2.50 respectively at the end of the semester will not be entitled to receive any Financial Assistance/ Qarz-e-Hasna. When their SGPA increases to the required level restoration of Financial Assistance/ Qarz-e-Hasna will be considered.

**FINANCIAL ASSISTANCE / QARZ-E-HASNA FORM**

Application for Financial Assistance / Qarz-e-Hasna for the Year \_\_\_\_\_

Name \_\_\_\_\_ Roll No. \_\_\_\_\_

Father's / Guardian's name \_\_\_\_\_

Profession of father / guardian (give details) \_\_\_\_\_

Business address of father / guardian \_\_\_\_\_

Self employed \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Gross Income \_\_\_\_\_

Profession of mother (give detail) \_\_\_\_\_

Business address of mother \_\_\_\_\_

Self employed \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Gross Income \_\_\_\_\_

Any other family member earning and assisting (give details including annual income) \_\_\_\_\_

Total family income per annum Rs. \_\_\_\_\_

Number of dependent family members :

Name	Relationship	Age	Occupation	*Educational expenses p.a.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Educational institution last attended by the applicant with address \_\_\_\_\_

Total tuition fee and other related expenses incurred in the last 2 years of education:

a) Tuition Fee \_\_\_\_\_ b) Other charges \_\_\_\_\_

How was it financed? \_\_\_\_\_

Give details of previous financial assistance received for education, if any \_\_\_\_\_

1. Bank account(s) - Please attach statement of last six months.
2. Income from investments in bonds, security and other business. Give details of ownership and annual income from property.

\* A certificate from the institution is recommended.

**FAMILY EXPENDITURE**

1. ACCOMODATION

1. If rented, what is the annual rent \_\_\_\_\_ Is it paid by self / employer

2.  Family owned Apartment     Bungalow     Town house

Covered Area \_\_\_\_\_ Number of rooms \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

3. Utilities Expenditure (monthly) Gas \_\_\_\_\_ Electricity \_\_\_\_\_ Telephone \_\_\_\_\_

Water \_\_\_\_\_.

(Please attached copies of last six months paid bills)

4. Education and transport expenses (monthly) excluding the applicant's

Tuition, books & stationary \_\_\_\_\_

Others (please specify) \_\_\_\_\_

Car \_\_\_\_\_ monthly fuel consumption \_\_\_\_\_ (detailed required)

5. House hold expenditure(Per Anum)

Food \_\_\_\_\_

Toileteries \_\_\_\_\_

Servent (Cook, Gardener, etc) \_\_\_\_\_

6. Personal Expenses (Per Anum)

Clothes \_\_\_\_\_

Personal grooming \_\_\_\_\_

Others \_\_\_\_\_

7. Taxes (please specify)

I \_\_\_\_\_

II \_\_\_\_\_

III \_\_\_\_\_

Licenses \_\_\_\_\_

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

\_\_\_\_\_

9. Any other expenditure \_\_\_\_\_  
(not mentioned above)

TOTAL EXPENDITURE \_\_\_\_\_

What alternative arrangements have you made to finance the educational expenses at IVSAA?

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Have you approached any other agency for assistance for your education i.e. Banks, Parent's / Guardian's employers or any other agency?

Agency	Amount applied for	Outcome
_____	_____	_____
_____	_____	_____
_____	_____	_____

amount of Financial Assistance / Qarz-e-Hasna  
requested from IVSAA : Rs. \_\_\_\_\_  
for the year 2011

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. If any information given in this application is found incorrect or false after grant of financial assistance, the School will stop further assistance and will have the right to claim refund of the amount already utilized.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent / guardian

\_\_\_\_\_  
Signature of applicant

# Indus Valley School of Art & Architecture

ST-33, Block - 2, Scheme 5, Clifton, Karachi - 75600

## UNDERTAKING

I \_\_\_\_\_ S/o. / D/o. \_\_\_\_\_ residing  
at \_\_\_\_\_  
recognise that by repayment of the Financial Assistance / Qarz-e-Hasna, I shall be helping other students  
like myself acquiring education at the IVS in future

In this respect I agree to pay back the total amount owed by me within the period of five years, in  
instalments, after I have graduated.

I shall also be bound to repay the total amount of Financial Assistance / Qarz-e-Hasna immediately /  
within the period of six months if I leave the School before graduation.

In case I fail to repay the Financial Assistance / Qarz-e-Hasna I authorise the School management to get it  
reimbursed on instalments from my employer, or to take any other suitable action to recover the  
outstanding amount.

_____ Name of the Applicant (in block letters)	_____ Signature	_____ Date
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## UNDERTAKING BY PARENT / GUARDIAN

I undertake and encourage and assist my child / ward to the fullest extent in repaying Financial Assistance  
/ Qarz-e-Hasna taken for the purpose of education from IVSAA.

_____ Name of Parent/Guardian	_____ Signature	_____ Date
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## GUARANTEE OF GOOD STANDING

(Applicant) and his / her family are known to me for \_\_\_\_ years and I believe they will repay the Financial  
Assistance / Qarz-e-Hasna as promised. In the event of their failure to do so I hereby undertake to repay the  
assistance availed by \_\_\_\_\_.

_____ Name	_____ Position	_____ Address
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# Indus Valley School of Art & Architecture

ST-33, Block - 2, Scheme 5, Clifton, Karachi - 75600

## PROMISSORY NOTE

I \_\_\_\_\_ S/o. / D/o. \_\_\_\_\_ residing at \_\_\_\_\_  
\_\_\_\_\_ hereby agree to abide by the  
conditions which govern the granting of Financial Assistance / Qarz-e-Hasna to complete my studies.

I further unconditionally agree to pay back the total amount owed by me within the period of 5 years in instalments after I have graduated.

I shall also be found to repay the total amount of Financial Assistance / Qarz-e-Hasna immediately / within the period of six months if I leave the School before graduation.

In case I fail to repay I authorise the School management to get it reimbursed on instalments from my employer.

Due to failure in repayment of Financial Assistance/ Qarz-e-Hasna, the School management is authorised to recover the amount as per suitable legal manner applicable.

\_\_\_\_\_  
Name in block letters with signature

\_\_\_\_\_  
Date

Guarantor :

\_\_\_\_\_  
Name (Guardian)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Address : \_\_\_\_\_

Witness : \_\_\_\_\_  
Name Signature Date

Address : \_\_\_\_\_