



APPLICATION FORM FOR FINANCIAL ASSISTANCE AND SCHOLARSHIP

INSTRUCTIONS

- Carefully read the **Financial Assistance & Scholarship Manual** before filling this form.
- This form is designed to be filled electronically using Acrobat Reader
- It is the applicant's responsibility to submit all supporting documents.
- The Deadline to submit the duly completed application form for Financial Assistance and/or Scholarship along-with documents is as **Friday, November 5, 2021**.
- No application will be entertained beyond this date.
- Applications with incomplete information and missing documents will also not be considered.
- Up to a maximum of 75% of tuition fee may be provided by IVS as Financial Assistance and/or Scholarship, the remaining 25% of the tuition fee and other fees has to be borne by the student.
- Applicants should be aware of their family's financial status so that if they are selected for interview, they can help the "Award Committee" make a fair assessment of their requirements.
- The student has to maintain a SGPA of 2.30 in Foundation Year and 2.50 in rest of the years to continue availing Financial Assistance and/or Scholarship. The Financial Assistance and Scholarship for the next semester will be discontinued if the SGPA of the student falls below the above mentioned required levels. However, the approved Financial Assistance and/or Scholarship will automatically be restored from the subsequent semester upon achieving the required SGPA.
- Recipients of Financial Assistance are legally required to repay the availed amount after one year from the time of their graduation over the subsequent 5 years in equal monthly instalments. For this purpose, a Promissory Note of the total amount received as Financial Assistance will be signed before graduation along with the monthly repayment plan agreed by the student.
- PROVIDING INCORRECT INFORMATION AND/OR CONCEALING INFORMATION WILL NOT ONLY RESULT IN DENIAL OF FINANCIAL ASSISTANCE AND/OR SCHOLARSHIP BUT MAY INITIATE STRICT DISCIPLINARY ACTION AGAINST THE APPLICANT.

LIST OF REQUIRED DOCUMENTS (*mandatory requirements)

The application **MUST** be accompanied with legible softcopies of the following documents. Please tick (✓) and complete the following checklist: Items marked with (*) are mandatory for the application to be considered.

(1) *CNIC OF:

Applicant (B-Form in case CNIC is not available)
Father
Mother
Guardian (in case guardian is other than father or mother)
Guarantor

(2) *LATEST SALARY SLIP/CERTIFICATE OF

Father
Mother
Guardian (in case guardian is other than father or mother)
Others (siblings, relatives, etc who contribute to your expenses)

(3) *LAST SIX MONTHS BANK STATEMENT OF:

Father
Mother
Guardian (in case guardian is other than father or mother)
Others (siblings, relatives, etc who contribute to your expenses)

(4) *LATEST FBR INCOME TAX CERTIFICATE AND WEALTH STATEMENT OF:

Father
Mother
Guardian (in case guardian is other than father or mother)
Others (siblings, relatives, etc who contribute to your expenses)

(5) *LAST 6 MONTHS UTILITY BILLS:

Electricity
Gas
Telephone
Mobile Phone (personal, father's, mother's, guardian's)

(6) LATEST MONTHLY EDUCATION EXPENSES OF:

Siblings (attach Fee Challans)

(7) LAST 3 MONTHS MEDICAL BILLS OF

Self
Siblings
Parents
Grandparents

(8) OTHER INFORMATION

Rent Agreement
Documentation related to investments made on securities/fixed deposits.
Documentary evidence of any loans obtained from employer or any financial institution.

Signature of Applicant:		Date:	
Parent's Signature: <i>(required if applicant is a minor)</i>		Date:	

(1) APPLICANTS INFORMATION						<i>(Insert photo below)</i>		
Full Name:				Gender:				
CNIC #				DOB				
Programme				Reg #				
Address (Line 1):								
Address (Line 2):								
Address (Area)				City:			Country:	
Tel:			Cell:			Email:		

(2) FATHER'S DETAILS (LEAVE THE ADDRESS FIELDS EMPTY IF SAME AS ABOVE)								
Full Name:				Highest Qualification:				
Address (Line 1):								
Address (Line 2):								
Address (Area)				City:			Country:	
Tel:			Cell:			Email:		
Occupation:				Name of Employer:				

(3) MOTHER'S DETAILS (LEAVE THE ADDRESS FIELDS EMPTY IF SAME AS ABOVE)								
Full Name:				Highest Qualification:				
Address (Line 1):								
Address (Line 2):								
Address (Area)				City:			Country:	
Tel:			Cell:			Email:		
Occupation:				Name of Employer:				

(4) LEGAL GUARDIAN								
Who is your legal guardian (give details below if other is selected)								
Full Name:				Highest Qualification:				
Address (Line 1):								
Address (Line 2):								
Address (Area)				City:			Country:	
Tel:			Cell:			Email:		
Occupation:				Name of Employer:				

(5) PARTICULARS OF FAMILY MEMBERS (MEMBERS LIVING WITH YOU)

No	Name	Age	Relationship	Marital Status	Occupation	Institution / Organization
1						
2						
3						
4						
5						
6						
7						
8						
Total Family Members						

(6) ACCOMMODATION DETAILS

Type:		Status:		No. of Rooms:	
Covered Area		Unit			

(7) FAMILY ASSETS

Details of family car	Make:		Model (year)		Engine (cc)	
Details of bank accounts. Attach bank statement(s) for last 6 months.						
Details of investment and shares. Give amounts & submit documents.						
Details of real estate owned. Give location, size, current market value and purchase price						

(8) SOURCES OF INCOME PER ANNUM

	Father/Guardian	Mother	Other Member(s)
1. Salary Income			
2. Business/Professional Income			
3. Agricultural Income			
4. Income from Securities/Investments			
5. Income from fixed assets			
6. Income from properties			
7. Any other income			
GROSS INCOME:			
GROSS FAMILY INCOME:			

(9) EXPENDITURE PER ANNUM

S.No.	Particulars	Expenses Per Annum (Rs.)
1	Education of Siblings (give details in the table below)	
2	Vehicle Running	
3	Rent	
4	Property Tax	
5	Gas	
6	Electricity	
7	Telephone	
8	Mobile	
9	Transport	
10	Food	
11	Medical	
12	Toiletries	
13	Clothes	
14	Repayment of Loan (give details of loan taken as attachment)	
15	Other Expenses	
TOTAL EXPENDITURE PER ANNUM		

DETAILS OF EDUCATIONAL EXPENSES OF SIBLINGS (PER ANNUM)

S.No.	Name of Sibling(s)	Name of Institution	Country	Expenses Per Annum
1				
2				
3				
4				
5				
TOTAL				

(10) FINANCIAL ASSISTANCE APPLIED / AVAILED OUTSIDE IVS (BANK, FATHER'S EMPLOYER, ETC)

Agency	Amount Applied for	Amount Secured

(11) FINANCIAL ASSISTANCE / SCHOLARSHIP SOUGHT FROM IVS

Specify the amount of Financial Assistance and/or Scholarship requested from IVS. A maximum assistance of up to 75% of the tuition fee can be requested.

Scholarship			Financial Assistance		
25%	50%	75%	25%	50%	75%

(12) UNDERTAKING FOR FINANCIAL ASSISTANCE BY THE STUDENT

- I will abide by the terms and conditions which govern the granting of Financial Assistance to complete my studies.
- I further unconditionally agree to pay back the total amount owed by me within the period of 6 years in instalments after I have graduated (5 years commencing 1 year after graduation) or earlier.
- I shall also be bound to repay the total amount of Financial Assistance immediately or within the period of six months if I leave the School before graduation.
- In case I fail to repay the Financial Assistance, I authorize the School management to get it reimbursed on instalments from my employer, or to take any legal action available under the laws of Pakistan to recover the amount.

Signature of Applicant:		Date:	
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(13) UNDERTAKING BY GUARANTOR (only needed in case of Financial Assistance)

In the event that the above student does not pay back the amount of Financial Assistance given to him/her by the Indus Valley School of Art and Architecture (IVS) I undertake to pay the same on his behalf within 7 (seven) days of being informed of the event by IVS.

Who is your Guarantor?

Full Name:		Highest Qualification:	
Address (Line 1):			
Address (Line 2):			
Address (Area)		City:	Country:
Tel:	Cell:	Email:	
Occupation:		Name of Employer:	
Signature of Guarantor:		Date:	

(14) DECLARATION

- I hereby solemnly declare that the above details provided by me are truthful and accurate to the best of my knowledge and no part of the information is concealed or deliberately left out.
- I understand that I may be subject to a range of possible disciplinary actions, including admission revocation or expulsion if any of the submitted information or supporting documents is found to be false.
- I also agree to accept the decision of the IVS Award Committee concerning the evaluation of my application for Financial Assistance and/or Scholarship.

Signature of Applicant:		Date:	
Parent's Signature: <i>(required if applicant is a minor)</i>		Date:	