



# NATIONAL CATHOLIC EDUCATION COMMISSION

# **Scholarship Form**

#### **Instructions**:

### Please read the following instructions before filling the form:

Photograph

- 01 The applicant should be a bona-fide parishioner. Attach a copy of two years offertory (chanda) card.
- 02 The applicant should be a registered member of any Parish.
- O3 Scholarships will be awarded to the students who get admission in Government recognized/registered institutions.
- 04 Scholarship will cover only tuition fee.
- 05 The Parish priest should recommend application of the student.
- 06 Students who secure minimum 60% marks or 2.5 CGPA are eligible to apply.
- 07 Students applying for scholarships from Class 6 to 10, must present recommendation letter of their school principal also.
- 08 Special scholarships are also for orphans and physically challenged students.
- 09 Students applying for the scholarships should not get any help from any other source for this purpose.
- 10 Decision taken by the Financial Aid Committee of NCEC will be final.
- 11 Please provide an active mobile number, as all information is given through Text and Calls.

#### **Documents required:**

- 01 Filled Scholarship Form
- 02 Attach one passport size picture pasted on the form
- 03 Attach attested photocopies of all your academic results
- 04 Attach copies of payment receipts from the institution where the student is currently enrolled
- 05 Attach photocopy of student's I.D. Card/Form B
- 06 Attach photocopy of yours and parent's CNIC
- 07 Attach salary certificate of parent
- 08 Recommendation letter of the principal in case of student of Class 6 to 10

Name of the Applicant	S/O, D/O	
Home Address:		
Phone Number:	Date of Birth	
Name of Degree/ Course:		





Name of the Institu	tion Stud	ying in: _					
Course Commencer	ment on _				Ends on _		
Length of the Degre	ee/Course	e:					
Total cost of the co		Requested Amount:					
			<u>Academ</u>	ic Record:			
Degree/Course/T	raining	Year	Roll No.	Marks	Grade	School/Co	llege/University
Father's Occupation Name of the organi							
Detail of Siblings:							
Names	Date	e of Birth	St	udying in	Work	king in (if)	Contact No.
Detail of the Schola	arship rec	eived fror	n any oth	er organizat	ion/source	(if any):	
Name of the Parish	:						
Name, Signature &	stamp of	the Parisl	h Priest: _				
Parents Signature: _							
Candidate's Signati	ıre:						





# **FOR OFFICE USE ONLY**

# Decision of the Financial Aid Committee

Financial Assistance:	Dated:					
Approved:	Refused:					