



Qarz-e-Hasna
 (Application Form)

Session: Fall/Spring.....

PARTICULARS OF THE APPLICANT

Student's Name: -----Registration # -----

Overall Semester: ----- Session **Spring / Fall** -----

Address:-----

PTCL #: -----Mobile # -----

1. **Father's Name:** _____ Computerized N.I.C. No _____
2. Status: Alive Deceased
3. Professional status: Employed Retired Business Owner
4. Name of Company/Employer: _____
5. Address: _____
6. Tel (Off): _____ Mobile: _____
7. Occupation Type: _____
8. Designation & Grade (BPS/ SPS/PTC etc): _____
9. Total Gross Monthly Income from all sources _____ NTN _____
10. **Any Other Supporting Person (Mother/ Guardian/ Brother/ Sister/Family Relative/Guardian):**
11. Name: _____ Relationship: _____
12. Address: _____
13. Tel(Off/Res) _____ Mobile No. _____ CNIC no. _____
14. Occupation _____
15. Designation _____ Name of Company/Employer _____
16. Total Monthly Gross Income (Salary/ Pension/ Others) _____

Affidavit

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 the grant of the Qarz-e-Hasna, will have to refund all payment received and a penalty levied.

The CIIT reserves the right for verification of the information given in this form.

Signature of Parent/Guardian _____

Name: _____

CNIC No. _____

Date: _____

Signature of Applicant

For Office Use only

It is hereby recommended that Mr/Ms.-----S/D of -----
RollNo.-----Semester-----granted an amount of Rs.----- as
Qarz-e-Hasna for-----semester -----, is recommended after verification of the
given information.

Convenor of FSPC

Date:-----

Note: (Copy of B.Form must be attached alongwith this application form)

Please Submit your form duly filled at following address:

Front office,
Chakshazad Campus,
Islamabad.
Tel #: 9#####.

(To be executed on Rs.15/- Non-judicial Stamp Paper)

**DEED OF AGREEMENT
FOR QARZ-E-HASNA (QHP)**

This agreement is made, on theday of2009, between

- (1) **Mr. / Miss** (name of the student) son / daughter of **Mr.** (Father's name) resident of -----
----- (Permanent Address) here after called **Student**, and
(2) COMSATS Institute of Information Technology, Islamabad Campus here after called CIIT, Islamabad.

WHEREAS **Mr. / Miss**-----, has been admitted by CIIT Islamabad for the degree of BS----- (subject) has agreed to accept the terms and conditions governing this Financial Support Program.

Now this deed witnesses as under:

- i) This Financial Support in term of Qarz-e-Hasna given to the student shall be initially valid for one semester (Semester Spring / Fall -----).
- ii) The Student shall fully abide by the decision on Qarz-e-Hasna by the FSPC constituted for the purpose of awarding financial support as per CIIT policy.
- iii) The Qarz-e-Hasna given to the student shall be strictly subject to the decision of the, Financial Support program Committee (FSPC) and may not be challenged in any case.
- iv) The student shall refrain from engaging himself in any political, commercial or any other activity incompatible with his program of studies.
- v) The student will be liable to disciplinary action as follows:
 - a) If he violates any condition laid down in the Bond for Qarz-e-Hasna program, CIIT reserves the right to take strict disciplinary actions against him.
- vi) The student is liable to disqualification from Qarz-e-Hasna or such other disciplinary action as CIIT may consider appropriate, if:
 - i) he violates any of the foregoing conditions, or
 - ii) he is found to have made any misstatement therein before.
- vii) The student shall conform strictly the terms and conditions required for the financial support program.
- viii) If the student found involved in any unlawful activity at any stage during stay at CIIT, the institute shall have the right to cancel admission without notice.

AND THE STUDENT FURTHER COVENANTS, that in case of breach of any of the above terms and conditions as well as the rules those governing Financial Support Program as directed by the CIIT (concerned campus) for the specified period, **Student** shall be financially penalized, failing which this amount shall be realizable from the following two Guarantors who stand sureties on my behalf jointly and severally, who have also signed this surety bond/undertaking below.:

IN WITNESS WHEREOF, the parties aforementioned have signed this deed in token of acceptance thereof.

Additional Registrar

Signature -----

Name -----

Date -----

Student

Signature _____

Full Name:

Designation/Dept:

NIC No:

Phone No:

Address:

Date:

Guarantor/Surety No.1

Signature_____

Name: _____

Relationship with the Student

NIC # _____

Address: _____

Dated: _____

Witness No. 1

Signature:_____

Name : _____

NIC # _____

Address:_____

Dated: _____

Guarantor/Surety No.2

Signature:_____

Name: _____

Relationship with the Student

NIC # _____

Address: _____

Dated: _____

Witness No. 2

Signature:_____

Name : _____

NIC # _____

Address:_____

Dated: _____