



THE PUNJAB EDUCATIONAL ENDOWMENT FUND
PEEF SCHOLARSHIP APPLICATION FORM 2024
OTHER PROVINCE/ISLAMABAD CAPITAL TERRITORY (ICT)

Attach white
background
picture
Size 2"x2"

Select your province (pls tick on relevant box)

Balochistan	Sindh	Khyber Pakhtunkhwa	Gilgit Baltistan	FATA (Merged Districts)	AJ&K	Islamabad Capital Territory
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1. Student Personal Information:

Student Name	Student CNIC/B-Form:
Father Name:	Father CNIC:
Contact No. / WhatsApp No.	Home Address:

2. Previous Educational Information: (Please mark with ✓)

Education Group:	Matric	Science	Arts						
	Intermediate	Pre-Medical	Pre-Engineering	Commerce	General Science/ICS	Humanities			
Year of Passing:	<input type="text"/>	BISE Roll No.	% age Marks _____		Marks obtained: _____				
<i>(Please attach copy of result card)</i>									

3. Current Educational Information:

Name and Address of Educational Institution:			College Roll no.
Degree Course:	Institution Contact No:	Institution Email Id:	
Department:	Duration of Degree Course (in years)	Degree Start (Month/Year)	Expected Degree Completion (Month/Year)
	<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Special Quota Category (If student falls in any category, please (✓) & attach relevant document):

<input type="checkbox"/> Orphan Death certificate of father issued by UC/Hospital/Nadra	<input type="checkbox"/> Children of government employees of BPS 1-4 Pay slip/ Pension book of current BPS or equivalency certificate
<input type="checkbox"/> Children belonging to minority Minority certificate from relevant authority	<input type="checkbox"/> Special children (differently abled) Disability certificate from DHQ/THQ hospital
<input type="checkbox"/> Children of civilians martyred in terrorist attacks Death certificate of father/ mother issued by UC/Hospital/NADRA with the cause of death	<input type="checkbox"/> Children of divorced mothers Copy of divorce certificate/ court orders

5. Endorsement by Current Institution/ Department:

1) It is certified that Mr./Ms. _____ is a regular student of this institution/ department.

2) It is certified that as per our assessment the monthly family income of the student is equal to or less than Rs. 60,000/-
(Please attach the original income affidavit printed on legal stamp paper attested by gazetted officer as per specimen income affidavit)

3) The student is not availing any other scholarship.

Signature & Stamp of Head of Institution/Department: _____

It is certified that Mr./Ms _____ is availing institution owned / operated hostel facility:
YES NO

Signature & Stamp of Hostel warden (in case of "YES" only): _____

Note: This scholarship form can only be submitted in the provincial / ICT focal office. The PEEF will not consider any application directly submitted/ sent to this office.

Focal Office Verification (for office use only)

Name of Focal Person: _____ Designation: _____ Signature & Stamp _____