

## **AL MUJTABA EDUCATION TRUST**

## **CANDIDATE REGISTRATION FORM**

APPLICANT DATA									
Name:	Name: PHOTOGRAPH								
NIC/Form B Number:			DOB:			and Attested Copies of			
Particulars of Parent/Guardian							NIC/Form B of Applicant and Parent or		
Name:			Cell Number:			Guardian to be			
NIC Number:				e mail:			attached		
Postal Address:									
Academic Results		Roll No		Class/Level	Marks	Grade	Percent		
Last Annual/Board Exams									
(attach attested copy of result sheet)									
*AMET Tests (where required):									
Alive Pare	nts: (Father/Mother/Both	)			Daughters	Other#	Total		
Agri Land:	Depende	ents on Family	nts on Family Head→						
House (Yes	/No):	Parent/Gua	ardian Oc	cupation:					
Other Property#:			#Attach details of other dependents and other property if any						
Last Electri	icity Bill^:		^Attach original or attested copy of electricy bill						
Family Inco	ome (per month) $ ightarrow$								
		DET	AILS OF S	SUPPORT REC	QUIRED				
Name of I	nstitution:								
Class/Educ	ation Program/Cou	irse:			*Recomn	nendations			
		_			ACC/PD	MSC	*EC Approval		
Number of	Semesters/Years:	Funds R		Requested↓	ACC/FD	IVISC			
Tuition Fee	(Semester/Year)								
Other Insti	tute Charges (Seme	ster/Year)							
Hostel Cha	rges (Semester/Yea	r)							
Books, Trai	nsport, Exams (Sem	ester/Year)							
Total Expenses (Semester/Year)									
Total Funds for Complete Duration									
Payee	Bank Account Nur	nber/Branch	ber/Branch		Title		Relationship with Applicant		
<b>Details</b> →									
	Note: Clearly encircle the relevant duration i.e., either 'Semesters' or 'Years' as appropriate								
			CE	RTIFICATE					
	<u>le</u> / <u>not eligible</u> to accep			-	ither 'eligible' or	'not eligible' as ap	plicable). If eligible		
	cate mentioned in instr						1		
	cieve scholarship or fina e that I will make effort:		-	-	-		-		
	ertify that the informati			-	-		reiety.		
Guardian/Candidate Signatures: Date:									
REMARKS BY THE PRINCIPAL/HOD/REGISTRAR:									
KLIVIANKS	DI IIILI MINCHAL	IIOD/IILGISI	<del>IVAII</del> .						
Name:					Signature:				
Tel: e mail:				Date/Stamp:					
*AMOUNT APPROVED/PAYMENT INSTRUCTIONS:									

\*ENDORSEMENTS

Member ACC PC/PD MSC Member Fin Secretary

	ELIGIBII	LITY CRITERIA								
Grade for Eligibility										
	Secondary School Certificate									
A <sup>+</sup> / A (Minimum 80 % marks)										
Higher Secondary School Certificate										
A <sup>+</sup> / A (Minimum 80% marks)										
Higher Education										
Graduate/Post Graduate Education at Institutes certified by 'Higher Education Commission'										
Minimum 75% in FSc/FA for General Subjects/Humanities; 80% Entire  Min GPA 2.75 / or Equivalent % Marks										
for other disciplines and Admission in Institute Program										
(2: 1		cal Education								
'Diploma Associate Engineer (DAE)' and 'Technical Skill Certificates'										
Certified by 'Technical Education Boards' of Central/Provincial Governments  Minimum 60% in Matric and										
Admission in Institute	Entire Progra	am	A Grade in Annual Exams							
, tallission in institute	ABBR	REVIATIONS								
[AMET: Al Mujtaba Education Trust]										
[ACC: Area Coordination Committee];[PC: Project Coordinator];[PD: Project Director];[MSC: Member Scrutiny Committee]										
	INSTRUCTION	IS FOR APPLIC	ANTS							
Columns/Rows/Spaces marked wi	th asterisk sign (*) are fo	or official use h	v Trust Members: to be left blank							
Application is to be signed by Parent/Guardian on behalf of students less than 18 years age. Adult students should sign										
the application themselves										
Following documents must be attached with the application: -										
a. Two passport size recent photographs. b. Attested copies of result cards/marks sheets.										
·										
c. Attested copy of B form/NIC of a										
d. Attested copy of NIC of parent o										
e. Electricity Bill in original or attest		/:	and a side of the feet to the feet to the section of the section o							
			ges paid or due (only for 'Higher Studies').							
	specimen available at w	ebsite "https://	www.almujtaba.pk/downloads/". (Only for							
applicants eligible for Zakat).	1.1		1.1 1							
•			which applicant needs financial support.							
Class/Course/Degree applied for a			-							
For all expenses clearly mention w										
Relationship with 'Payee' (person nominated to receive payment on behalf of the applicant) must be written clearly.										
Heads of Institutions are requested		ects for bonation	de students of own institution: -							
a. Remarks/recommendations for s										
b. Validation of financial support requested by the applicant.										
c. Signature with office stamp and contact details.										
Applicants must ensure signatures of the candidate/parent/guardian, as the case may be, at the appropriate space. Unsigned applications will not be processed.										
For any clarification(s): Following may be contacted: -										
(දීා) <b>AMET</b> Whatsapp Num	ber / Landline Number:	0336-4955466	051-5153391							
e mail: <u>almujtabatrust@gm</u>	ail.com	Website: <u>h</u>	ttps://www.almujtaba.pk							
Postal Address: House 463, Ground Floor, Street 17, Chaklala Scheme III, Chaklala Cantt, Rawalpindi										