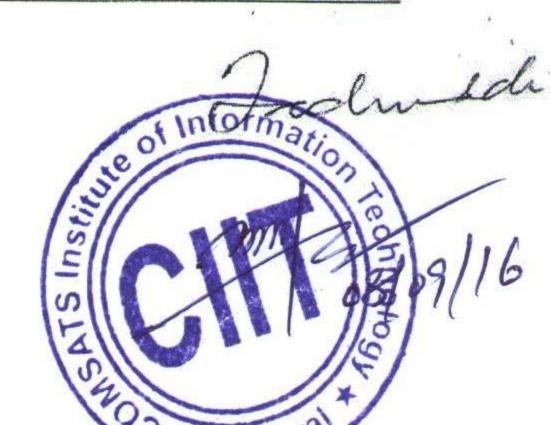
COMSATS INSTITUTE OF INFORMATION TECHNOLOGY QARZ-E-HASNA (Application Form)

Particulars of the Applicant

Student's Name:	Name: Registration #		
Postal Address:			
Email:	PTCL #:		
	Particulars of	Father	
Name:	C	.N.I.C. No:	
Status: Alive	Deceased		
Professional status: Employed	Unemployed	Business owner	Retired
Name of Employer:			
Address:			
Tel (Off):		e:	
Designation & Grade (BPS/SPS			
otal Gross Monthly Income from	m all sources	NTN	
Particulars of Any O	ther Supportin	g Person (Moth	er/ Guardian/
Brothe	r/ Sister/ Relati	ve / Guardian):	
Name:		Relationship:	
Occupation			
Designation	**	CNIC No.	
Name of Employer	Address:		

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	721 /2013 /1283		September 16, 2013
Email:	PTCL #:	Mobile	e#
Total Monthly Gross	Income (Salary/ Pension/ Other	s)	* *
	For Office	e Use only	
t is hereby recomme		S/o D/o _	
Reg# Hasna, after verificat	may be granted an ame	ount of Rs	as Qarz-e-
			Convenor of FSPC
			Dotor
			Date:
Pleace cubmit your d	uly filled in application to the fo	llowing address	Date.
	uly filled in application to the fo	llowing address	Date.
		llowing address	Dave
Student Financial Aid			Date.
Student Financial Aid	d Office		Date.
Checklist of Requested copies of CNIC / 'Form-B' of	d Office uired Supporting Docume Applicant		Date:
Checklist of Requested copies of CNIC / 'Form-B' of CNIC Father/Mother CNIC (Guarantors)	d Office uired Supporting Docume Applicant Guardian		Date.
Checklist of Requested Copies of CNIC / 'Form-B' of CNIC Father/Mother CNIC (Guarantors)	d Office uired Supporting Docume Applicant Guardian	nts	
Checklist of Requested Copies of CNIC / 'Form-B' of CNIC Father/Mother CNIC (Guarantors)	d Office uired Supporting Docume Applicant Guardian	nts	
Checklist of Requested Copies of CNIC / 'Form-B' of CNIC Father/Mother CNIC (Guarantors)	d Office uired Supporting Docume Applicant Guardian	nts	

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September 16, 2013

No: CIIT-Reg/Notif-72//20/3/1283

QARZ-E-HASNA

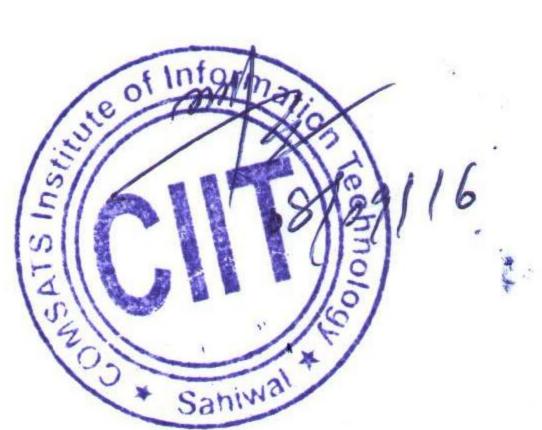
Affidavit

All information given in this application is correct and true to the best of my knowledge. I understand that any incorrect information will result in the cancellation of my application. If any information given in this application is found to be incorrect or false even after the grant of the Qarz-e-Hasna, I shall return all the payments, along with interest @ 10 % p.a., in addition to any legal proceedings, as deemed fit by CIIT.

The CIIT reserves the right to verify the information given in this form.

Signature of Parent/Guardian	Signature of Applicant
Name:	Name:
CNIC No	Reg#:

Indhuddi



SPECIMEN

(To be executed on Rs.50/-Judicial Stamp Paper)

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

This agreement is made, on theday of2013, between
(1) Mr. / Miss (name of the student) son / daughter of Mr. (Father's name) resident of (Permanent Address) hereinafter referred to as the Student;
and (2) COMSATS Institute of Information Technology,Campus hereinafter referred to as the Institute.
WHEREAS Mr. / Miss, admitted to CIIT (Campus) for the degree of BS/MS (Subject), agrees to accept the terms and conditions governing this Financial Support Program.
Now this Deed witnesses as under:
i) This Financial Support in terms of Qarz-e-Hasna, given to the student, shall be initially for one semester (Spring / Fall).
ii) The Student shall abide by the decision of the FSPC constituted for the purpose of awarding Financial Support as per CIIT policy.
The Qarz-e-Hasna given to the student shall be strictly subject to the decision of the Financial Support Program Committee (FSPC) and cannot be challenged in any case.
iv) The student shall refrain from engaging himself/herself in any political, commercial or any other activity incompatible with his/her program of studies.
v) CIIT reserves the right to invoke strict disciplinary proceedings against the student, in case he/she violates any provision of this bond.
vi) The student is liable to disqualification from the Qarz-e-Hasna Scheme in case he/she is found to have made any misstatement in his/her application.
vii) The student shall strictly conform with the terms and conditions required for the Financial Support Program.
AND THE STUDENT FURTHER COVENANTS, that in case of breach of any of the terms and

conditions as well as the Rules governing the Financial Support Program, for the time being in

force, the Student will be penalized in monetary terms. In case of his/her failure to pay the

penalty, the amount shall be realizable from the following two Guarantors who stand as Sureties

on behalf of the student, jointly and severally, and who have also signed the Sureties.

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September 16, 2013

SURETY

Student's Details	
. 1	, son/daughter of
resident	of
o hereby undertake that I will return th	e full amount of Qarz-e-Hasna given to me by CIIT.
	Cianatura
	Signature
	Full Name:
	Guarantee
1) I	, son/daughter of
esident of	, being
nentioned above. In case of default or return the amount in full to the CIIT.	non-payment by him/her, I will personally be held liable to
	Signature
	Full Name:
Guarantor/Surety No.1	Guarantor/Surety No.2
Signature	Signature:
Name:	Name:
Relationship with the Student	Relationship with the Student
	Page 5 of 6

NIC #	NIC #
Address:	Address:
Dated:	Dated:
Witness No. 1	Witness No. 2
Signature:	Signature:
Name:	Name:
CNIC#	CNIC#
Address:	Address:
Dated:	Dated:
N WITNESS WHEREOF, the parties aforemed compared thereof. MANAGER	entioned have signed this deed in token of their
STUDENT FINANCIAL AID OFFICE	
Signature	Signature
Name	Name:
Date	Reg#:
	CNIC No:

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