

COMSATS University Islamabad, Sahiwal Campus
QARZ-E-HASNA
(Application Form)

Particulars of the Applicant

Student's Name: _____ Registration # _____

Postal Address: _____

Email: _____ PTCL #: _____ Mobile# _____

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): _____ Mobile: _____

Designation & Grade (BPS/ SPS/PTC etc): _____

Total Gross Monthly Income from all sources _____ NTN _____

**Particulars of Any Other Supporting Person (Mother/ Guardian/
Brother/ Sister/ Relative / Guardian):**

Name: _____ Relationship: _____

Occupation _____

Designation _____ CNIC No. _____

Name of Employer _____ Address: _____

