	<u>Company Setup Un</u>			A	
كرام	ئة اسكالرشپ كاانقلابي پرو	إءوطالبات كيلة	روستحق طلبا	ت بلوچېتان کا ہونہا	حکومر
SPONSOR	SHIP APPLICATION F	FORM (SAF)	2021-22	2 ( 3 <sup>™</sup> BATCH AND INTAKE OF	SPRING/FALL 2021)
F # (FULI	LY FUNDED SCHOLARSHIP	/ SPONSORSHIP	P PROGRAN	I FOR QUALITY EDUCA	TION) Date:
(THE ED	UCATIONAL INSTITUTIONS RECOGNIZ	ED AS THE CENTERS OF	EXCELLENCE (C	OE) ARE OUT OF BALOCHISTAN	SO FAR)
ease Tick-Mark each bo	x against the Pre-Requisite				
	Application Form (SAF) 2021-2			copy of the Marks Sheet	of previous results, as applica
	omicile Certificate of Student/I	Father(Balochistan			
	ppy of the Student Identity Card.		4 Photographs of the Student. Attested copy of Pay-Slip OR Income Certificate of Father/Mot		
	copy of CNIC / Smart Card / B-Form of Student. copy of CNIC of Father/Mother/Guardian, as applicable.		Guardian on stamp paper of Rs: 50 at least.		
Attested copy of CNIC of F	'attiel / Mottiel / Gual ulan, as aj	pplicable.			
	D, VERIFIED AND ENDORSI AL PERSONS (FPS) WITH		ARE REQUI		
TUDENT PROFILE					
olicant's Name 👘 🕞					
IN CAPITAL LETTERS)					
her's Name Capital letters)					<b>xO</b>
e of Birth				(DD/MM	1/YYYY)
C <b>/Smart Card/B-Form</b> # ark, CNICSmart CradB-Form_					
h <b>er/Mother/Guardian CNIC</b> lark, Father Mother Guardian					
ider: Male/Female/Trans	gender		Relig	ion	Nationality
vince	Sta B	District of L	.ocal / Domic	ile	
rrant Rasidanca Addrass	15 gm /		N. A.		
		2. E.F.	VAN 12	AEN	$\mathcal{M}$
	ess		3 Vol	* 2 38	10
iling Address					
		1312			
Indline Phone Number (with city code)			Student' Mobile #		
ail ID				SIN	
	GRAL		18. 19	2.30	P
LTERNATE CONTACT DETAIL ile #		(nlassa s	nooisu tho n	me and reletionship wit	h altarnata contact norcen)
					th alternate contact person)
ne				Relationship	
ETAIL OF BANK ACCOUNT					
of Account		Account #		Soving/Curront Ar	reount
	Account # Saving/Current Account				
				Branch with Code	
Iress			ITUTE & Ion Petant	LOCATION (Also City & Province)	PERIOD IN YEARS FROM TO
Iress Revious Academic Backgr Certificate/course	OUND (pl. provide latest to previous educ	name of Insti EXAMINATI BOARD/COMP	ITUTE & Ion Petant	LOCATION	PERIOD IN YEARS

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6. CURRENT INSTITUTION & ACADEMIC DETAIL OF O	NGOING COURSE OF STUDY	
Education Level/Study Course /Degree Progra	am: (pl. tick-mark any one, as applicable)	
6 <sup>th</sup> Pass 7 <sup>th</sup> Class or 7 <sup>th</sup> Pass 8 <sup>th</sup> Class leading to	(considerable session intake	
shall be Spring/Fall 2021 only).	OR	
Intermediate Pass 1 <sup>st</sup> Year of BS/BE or E qu shall be Spring/Fall 2021 only).	ivalent Undergraduate Program of 4/5 Years	considerable session intake
Name of Institute:		
Registration/Enrollment #	Se	ssion
Morning or Evening	Shift timing Start	End
Major Subject	Scier	nce/Arts
		nt Class/Ongoing Semester as applicable
		Total GPA or CGPA
Obtained GPA or CGPA		s %
Full & Short Name of Current Institute	AND WEALS	
Name & Designation of the Head of Institute		
Telephone # with city code	city code	
Mobile #		
7. UNDERTAKING BY THE STUDENT/APPLICANT	ne/trobuto e oc	plicant, solemnly state that all information provided above
are true and can be re-verified, if needed.		pricant, solennity state that all information provided above
Sign Date	Confirmed by the Father/Mother/	Guardian, if possible also specify relationship
Name	Sign	Date
8. VERIFICATION BY THE HOSTEL WARDEN/INCHARG	F	
Hostel of Institute or Private Hostel or sharin		If private or rented then address
		20 V
Monthly Hostel fee PKR	Monthly Mess Cl	harges PKR
Total Annual Cost	(In words)	
Name	me Sign & Stamp	
9. VERIFICATION & ENDORSEMENT BY THE CO-FOCA		
<ul> <li>It is confirmed that student is maintaining have a student is also confirmed that student is not available.</li> </ul>	-	requires <b>not less than 75%</b> annual attendance. reimbursement etc.
• Also confirmed that above student is taking a	active part in extra curricular /sports activitie	
PARTICULARS	CO-FOCAL PERSON (CFP)	FOCAL PERSON (FP)
Name Designation		
Telephone Landline (with city code)		
Fax #		
Mobile #		
Email ID		
Name of Institute		

Sign with stamp by the CFP

Sign with stamp by the FP