



# SINDH GRADUATES ASSOCIATION

09/12 RIMPA PLAZA, M.A. JINNAH ROAD, KARACHI

## SCHOLARSHIP NOMINATION FORM "A"

### PART-A

1. Name of the Candidate: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. Place of Birth: \_\_\_\_\_
4. Institution: \_\_\_\_\_
5. Class / Year: \_\_\_\_\_
6. Date of the admission in the college / institution: \_\_\_\_\_
7. Present address of candidate: \_\_\_\_\_

### 8. ACADEMIC RECORD:

Examination	Year of Passing	Division	Board	School/College
Matriculation				
Intermediate				

### PART-B

9. Name of Father / Guardian: \_\_\_\_\_
10. Profession: \_\_\_\_\_
11. Annual Income: \_\_\_\_\_
12. Dependants with ages and education: \_\_\_\_\_  
(1) \_\_\_\_\_ (4) \_\_\_\_\_  
(2) \_\_\_\_\_ (5) \_\_\_\_\_  
(3) \_\_\_\_\_ (6) \_\_\_\_\_

13. Present Address: \_\_\_\_\_  
\_\_\_\_\_

14. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

PART-C

**DECLARATION / AFFIRMATION**

Here by declare that the above facts are true to the best of my knowledge. If I am lucky to get this scholarship I shall work hard and prove my worth in my examination.

I Further affirm that when I shall enter in the practical life. I shall try to help poor brethren in the per suit of education. If I am lucky to become a doctor / engineer than I will donate one scholarship to Sindh Graduates Association.

Signature of Father / Guardian

Signature of Candidate

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PART-D

**CERTIFICATE BY HEAD OF INSTITUTION**

Certified that Mr. /Miss: \_\_\_\_\_

S/o. D/o \_\_\_\_\_ of class

Is Studying in \_\_\_\_\_ College / School.

He / She is regular in classes and bears good moral character.

His / Her performance in excellent / Very Good / Fair.

Signature

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PART-E

**FOR OFFICE USE ONLY**

Date of receipt of application: \_\_\_\_\_

Date of interview of the candidate: \_\_\_\_\_

Remarks of the Scholarship Committee.

Signature  
(Member)

Signature  
(Member)

Signature  
(Chairman)