Application #:

_____ Dated of Receiving :_____ (to be filled by the NTHP office)





IBA -NATIONAL TALENT HUNT PROGRAM -2015

APPLICATION FORM

Note: IF YOU HAVE ALREADY FILLED-UP AN ONLINE APPLICATION FORM, THAN THERE IS NO NEED TO SUBMIT THE PRINTED VERSION AGAIN.

ONLINE FORM : https://talenthunt.iba.edu.pk

LAST DATE OF SUBMISSION: FEBRUARY 15, 2015

ASSESSEMENT TEST: MARCH 16, 2015

RESULT OF ASSESSMENT TEST: MARCH 30, 2015

INTERVIEWS: APRIL 10, 2015

FINAL RESULT: APRIL 27, 2015

For Inquires contact us at: Dr. Zeenat Ismail – Coordinator- NTHP/ SFP/STHP Syed Rizwan A. Bukhari – Senior Executive

Phone: +92(21)-38104700-1 Extension: 2632

Fax: +92(21) 99261807 or 99261508

Email: nthp@iba.edu.pk Website: http://nthp.iba.edu.pk Mailing Address:

Coordinator – NTHP/SFP/STHP IBA Main Campus, Room No. 10(A), Abdul Razzaq Tabba Academic Building, University Enclave, University Road Karachi -75270

GUIDELINES FOR FILLING OUT THE APPLICATION FORM

- a) Read the general information thoroughly, which will enable you to complete the application form?
- b) Attach the following as supporting documents along with your application:

1)	Copies of Computerized NIC's of all family members							
2)	Salary slip / Income certificate (or Pension slip) of all earning family members *							
3)	Bank statements for last six month of all family members having an account.							
4)	 Income tax returns of all earning family members for last year. 							
5)								
6)	Utility bills last six month;							
	a) Electricity b) Telephone c) Gas d) Water							
7)	Saving certificates, bonds, shares, investments, CDC account statement.							
8)	Property ownership documents, including agriculture land, plots and houses.							
9)	Rent agreement (if applicable)							
10)	Loan document(s), including credit card bills and bank loan statements.							
11)	Medical bills / expenditure related documents.							
12)	Latest fee challans / Fee concession (scholarship / loan) document(s) of sibling(s).							
13)	Wealth statement for all family members for last year.							
14)	Your domicile certificates.							
15)	Any other relevant document(s) necessary to support your application.							
16)	Statement of purpose.							
17)	Educational documents (F.A./ F.Sc/ H.Sc.)							

* Note: An <u>income certificate</u> is the document that shows monthly/annual income. If your parents/guardian is salaried, an original copy of a pay slip should be attached, otherwise if your parents/guardian owns a business they should submit Bank Statement for the last six months. If parents/guardian does not fall in either of the above two categories (that is salaried employee or business man) they should submit an undertaking on a stamp paper/affidavit (of Rs.20) stating their income and with relevant details.

GENERAL INFORMATION

a) Submit the complete IBA National Talent Hunt Application Form to the Coordinator - IBA Main Campus, Room No. 10(A), Abdul

Razzaq Tabba Academic Building, University Enclave, University Road Karachi, Latest by February 15, 2015.

- b) Make photocopies of the application form when it reaches you, and keep the original in a safe place. Fill out the photocopies first and when everything is clear and final, copy out the same on the original.
- c) Read the form very carefully before filling it to be able to get a clear picture of the requirements.
- d) Fill in the form in black ink with a ballpoint pen and write in block letters.

TIPS FOR COMPLETING APPLICATION FORM

- a) Furnish factual, comprehensive and authentic information in the form.
- b) Provide educational information in chronological order.
- c) Carefully note down your enrollment number and remember to use it correctly during future correspondence.
- d) <u>Answer all questions. Those not applicable should be marked N/A. All required documents (wherever applicable) listed below</u> are to be attached.

PLEASE AVOID THE FOLLOWING

- X Provide vague / incomplete information.
- X Overwriting / scratching information on the form.
- X Submit the application with documents in wrong order without folder.
- X Leaving any question unanswered.

Section: A :				Personal	Details	
Section. A .				i cisonai	Detailis	
		+ = - f = \				4 Photographs
PERSONAL DETAILS : (Please use BLOC	Staple here					
Forms with incomplete information will	not be proces	sed.				
Name:						
Father's Name:			Guardi	an's Name:		
Domicile:				ard # (Studen	t):	
				vailable, refer th	•	
Father's / Guardian's CNIC #:			Date of E	Birth/		_
(Provide a copy of NIC)				dd / n	nm / уууу	1
Postal Address: (All future corr	Postal Address: (All future correspondence will be made on this address)					
				TEHSIL:		
DISTRICT:	CITY:			PROVINCE:		
PHONE #: /	-	Mobile #:				
(City code)		iviobile #:				
Residential Address:						
				TEHSIL:		
DISTRICT:	CITY:				PROVINC	:
Phone #: / (City code)		Mo	bile #:			
Email*:						

ED	UCATIONAL DET	AILS:							
At	tach an attested c	opy of all t	the result	t cards/ M	ark sheets	with your ap	plication	on form.	
		Roll Number	Marks Obtained	Total Marks	Per. %	Passing Year / Month	Schoo	I/ College Name	
	Matric (X)								
	HSSC-Level -I (XI)								
	HSSC-Level -II (XI	1)							
	Stream of HSSC Level	Pre-Medic	cal	Pre-Eng.		Gen. Sci.	Art	s/Commerce	Other:
	Name of Examination Board						·	Roll No. (Last attended Examination)	

Secti	on B:		Parents'/Guardian's Information
1.	Father's / Guardian's Name		
2.	CNIC Number		
3.	Residential Address (if different from above):	45	
4.	Tel. # (Office) Cell Phone #	Fax #	Email
5.	Present Occupation (Give full details)		
6.	Designation	Name of Company /	Employer
7.	Monthly Income Gross	Net	Pension (if retired)
8.	Annual Income Gross	Net	<u>0</u>]1
9.	Previous Occupation (if applicable)		
10.	Mother's Name		
11.	CNIC Number		
12.	Residential Address (if different from above):		
13.	Tel. # (Office) Cell Phone #	Fax #	Email
14.	Present Occupation (Give full details)		74 - 13 1
15.	Designation	Name of Company /	Employer
16.	Monthly Income Gross	Net	Pension (if retired)
17.	Annual Income Gross	Net	
18.	Previous Occupation (if applicable)		
19.	Spouse's Name		
20.	CNIC Number :		
21.	Residential Address (if different from above):	г. 243	
22.	Tel. # (Office) Cell Phone #		Email
23.	Present Occupation (Give full details)		
24.	Designation	Name of Company /	Employer
25.	Monthly Income Gross	Net	
26.	Annual Income Gross	Net	

1.	Details of Assets / Propert	ies (Please	mention curre	ent market valu	es in Rupe	es)	
v	Value of Assets	Father	Mother	Spouse	Self	Brothers/Sisters/ Children	Total
1	Business		8 <u></u>	s 7 <u>8</u> 27			-
I	Land & Building	<u>a a</u> a	<u>.</u>		<u> </u>		4 <u>2</u>
۲	Vehicle(s)						
S	Saving Accounts & Deposits				a <u></u>		3 4
I	Investments	<u>a</u> 2	š <u></u>	<u></u>	N <u>1 (2</u>)		22
(Others Total		2	i			1
2.	Accommodation type:						
	0 Apartment	0	Bungalow	о Т	'own House		
3.	Accommodation ownershi	ip:	o F	Family Owned	o R	ented	
4.	If owned, area of plot		Construc	ted (Covered)	area of the	house	
5.	Locality of the house						
6.	Total number of rooms in	house	Ni	umber of bedro	ooms		
7.	Number of Air Conditione	ers in house	R	Numbe	er of Televis	sion	
8.	Number of cars owned by	the family	(with make ar	nd model)			
9.	Any other house or flat ov	vned by the	family:	Yes 🗆	No 🗆		
	If yes, please give details	regarding lo	ocation, size, r	ent, etc., on a	separate she	eet.	
10.	Agricultural land owned b	y family:		Yes 🗆	No		
	If yes, please give details	regarding lo	ocation, size, r	ent, etc., on a	separate she	eet.	
11.	Bank savings Rs.		i	in the form of			
12.	Other investments Rs.		i	in the form of			
13.	Any other property or plot	s: Yes 🗆	Ν	lo □			
	If yes, please give details	regarding lo	ocation, size, r	ent, etc., on a	separate she	eet.	
14.	Details of Liabilities (Plea	se mention	current marke	et values in Ru	pees):		
	a) Amount O	utstanding_					
	b) Nature						
	c) Repayment	Schedule (Please give fu	ull details)			
	d) Loan / Deb	t Maturity I	Date				
	e) Reason for	obtaining l	oan / debt				

						1	Family Inco
	.Family Income (Please a	ttach supp	oorts and give full	details in Ru	pees)		
	verage Monthly acome arising from:	Father	Mother	Spouse	Self	Brothers/Sisters/ Children/Other Supporting hands	Total
S	alary						
F	Business						
I	and & Building	H					
	aving Accounts & Deposits	20	-10 ST	0 . 0 .	S . 33		
	nvestments						
	Others						
C	Total	35		3 7	S . 75		-9 S
	Total	<u>1.2</u> 2.2			3 		
	Annual agricultural incom	me of fam	uily				
	Any other form of incom	ne from as	sets or otherwise	0 			
	TOTAL FAMILY INCOM	Е _					
	Family Expenditure (Pleas Dependent Family Membe					gs are Studying	
	Dependent Family Membe				ber of Sibling	gs are Studying Institution ying)	Fee (per month
	Dependent Family Membe Brothers/Sisters/ Children/ Other Dependent	ers	Occupation		ber of Sibling Name of	Institution	
	Dependent Family Member Brothers/Sisters/ Children/ Other Dependent Family Members	Age	Occupation (If working)	Numł	ber of Sibling Name of (if study	Institution ying)	
	Dependent Family Members Brothers/Sisters/ Children/ Other Dependent Family Members In case of rented accommod a) What is the annual rent F	Age	Occupation (If working)b) Is it pai	Numł	ber of Sibling Name of (if study	Institution ying)	
	Dependent Family Member Brothers/Sisters/ Children/ Other Dependent Family Members In case of rented accommon a) What is the annual rent F Utilities Expenditure (avera	Age dation: Rs age of last s	Occupation (If working)b) Is it pai six months bills)	Numł	ber of Sibling Name of (if study	Institution ying)	(per month
	Dependent Family Members Brothers/Sisters/ Children/ Other Dependent Family Members In case of rented accommon a) What is the annual rent F Utilities Expenditure (avera Telephone (or Mobile) Rs.	Age Age dation: Rs age of last s	Occupation (If working)	Numł	ber of Sibling Name of (if study berefore)	Institution ying)	(per month
	Dependent Family Member Brothers/Sisters/ Children/ Other Dependent Family Members In case of rented accommon a) What is the annual rent F Utilities Expenditure (avera	Age Age dation: Rs onthly aver	Occupation (If working)b) Is it pai six months bills) Electricity rage) Rs.	Numł	ber of Sibling Name of (if study bloyer? (Strik	Institution ying) e out one) Rs W	(per month
	Dependent Family Member Brothers/Sisters/ Children/ Other Dependent Family Members In case of rented accommod a) What is the annual rent F Utilities Expenditure (avera Telephone (or Mobile) Rs House hold expenditure (m	Age Age dation: Ass onthly aver penses (mo	Occupation (If working) (If wor	Numł	ber of Sibling Name of (if study beloyer? (Strik	Institution ying) e out one) Rs W	(per month)

* Provide information about all cars/ motorcycles that your family possesses.

11. Taxes (Please specify)

12.

(I)	Income Tax: Rs.
(II)	Property Tax: Rs.
(III)	Others (Please Specify): Rs.
Licer	ises
Travel (In Pak	istan and abroad during the past two years. Please give details with approximate expenditure per visit).

13. Any other expenditure (not mentioned above)

14.	TOTAL EXPENDITURE

* Provide information about all cars / motorcycles that your family possesses.

Section : E	Details of other Financial Assistance Arrangements
Mode	Amount (In Rupees)
Self-financed / Other sources	
Financial assistance requested from IBA	
Total (Tuition fee only)	
Have you approached any other agency for assistance for	your education i.e. banks, organizations, individual employer etc.
Agency	Applied For Outcome
NTHP ASSESSMENT TEST CENTER: Please choose one of the following centers for NTHP Assessr	ment Test
🗆 MULTAN 🗆 PESHAWAR 🗆 ISLAMABA	AD 🗆 KARACHI
🗆 QUETTA 🗌 LAHORE 🗌 GILGIT BAI	LTISTAN
Note: The final decision of the test center lies with the NTHF	P Program Office

Section F:

- 1. The information given in this application is true to the best of my knowledge and I understand that any incorrect information will result in the cancellation of this application. Further, If any information given in this application is found incorrect or false after grant of financial assistance, the Institute will stop further assistance and:
 - The admission of the Applicant will be cancelled in case of 1st Semester students.
 - In case of existing students, immediate repayment of the total Scholarship along with a fine amounting to the Scholarship paid to the student will be required. Such a student will also be disqualified for applying for any further loan / scholarship.
- 2. We do hereby give our consent and permit a bonafide employee of IBA carrying authority letter to visit the residential / other location mentioned as part of our particulars for the purpose of physical verification of information provided by me in the financial assistance application form.

-			
	Date	Signature of Parent / Guardian	Signature of Applicant
Refe	erences (Excluding Parents / Guardia	an):-	
1.	Name	80 	
	Relationship:		
	Business Address		
	Contact Information: Residence	:Office:	_ Cell:
	NIC #:	Signature:	
2.	Name		
	Home Address		
	Business Address		
	Contact Information: Residence	:Office:	_ Cell:
	NIC #:	Signature:	

Statement of purpose

Why do you require financial aid?

What about your background and/or interest makes you competitive for this program (please be as specific as possible)? (Attach separate sheet if required)