



DHORAJI ASSOCIATION

HESR NO.

Address: C-61, Adjacent to V.M Public School, Karachi
Contact Number: 021-34932744, 021-3493235

www.fb.com/dhorajiasociationofficial

HIGHER/ OTHER EDUCATION SCHOLARSHIP FORM 2023-2025

DAUGHTER OF DHORAJI (ZAKAT)

OR

DHORAJI (DONATION)

PERSONAL INFORMATION

Student Name :	<input type="text"/>	GENDER: FEMALE <input type="checkbox"/> MALE <input type="checkbox"/>
Date Of Birth:	DD <input type="text"/> MM <input type="text"/> YYYY <input type="text"/> Surname: <input type="text"/>	CNIC#: <input type="text"/>
Address:	<input type="text"/>	
Father Name:	<input type="text"/>	CNIC#: <input type="text"/>
Mobile NO.	<input type="text"/> (Enter Father Mobile NO. 03XXXXXXXXXX)	DA CARD NO: <input type="text"/>
Mother Name:	<input type="text"/>	CNIC#: <input type="text"/>
Mobile NO.	<input type="text"/> (Enter Mother Mobile NO. 03XXXXXXXXXX)	DA CARD NO: <input type="text"/> IN CASE (D/D) <input type="text"/> (Father)

EDUCATIONAL INFORMATION

Institute Name:	<input type="text"/>	Degree	<input type="text"/>	Subject	<input type="text"/>			
Institution Address	<input type="text"/>	Grade	<input type="text"/>	CGPA /Per%	<input type="text"/>			
Admission:	<input type="text"/>	Semester:	<input type="text"/>	Laptop:	<input type="text"/>			
College:	<input type="text"/>	Others:	<input type="text"/>	ACCA/CA/ICMA:	<input type="text"/>			
Reason: (Details) <input type="text"/>								
Last Help From DA in education Department: <input type="text"/>								
S.NO	Degree	Group	Board/ University	Passing Year	Marks Obtained	Total Marks	CGPA/ Grade	Merit Marks
1								
2								
3								
4								
Other Inst Amount:	<input type="text"/>	Self Amount:	<input type="text"/>	DA Amount:	<input type="text"/>	Total Amount:	<input type="text"/>	
Other Inst Name:	<input type="text"/>							

PARENT'S/ INSTITUTION BANK ACCOUNT DETAILS

Bank Account NO.	<input type="text"/> (Provide IBAN Number)	Bank Name :	<input type="text"/>
Title Of Account:	<input type="text"/>	Branch Name:	<input type="text"/>
		Census NO.	<input type="text"/>

FOR OFFICE USE ONLY

Application Received By:	<input type="text"/>	Date:	<input type="text"/>
Convenor Signature:	<input type="text"/>	Fees/ Amount Approved (DA):	<input type="text"/>
W.E.F. Mth/ One Time:	<input type="text"/>	Remarks (IF ANY)	<input type="text"/>
Scholarship on A/C:	HEIGHER EDUCATION <input type="checkbox"/>	OTHER EDUCATION	<input type="checkbox"/>

PLEASE ATTACHED THE FOLLOWING DOCUMENTS (COPIES)

1. LAST ANNUAL MARKSHEET/ REPORT CARD OF THE STUDENT
2. LAST PAID FEES CARD/ RECIEPT OF THE STUDENT
3. B-FORM OF STUDENT
4. CNIC CARD OF FATHER AND MOTHER BOTH
5. DA MEMEBERSHIP CARD OF FATHER (IN CASE OF REGISTERED MEMEBR)
OR
DA MEMBERSHIP CARD OF D/D FATHER AND BROTHER (IN CASE OF DAUGHTER OF DHORAJI)
OR
NIKKAH NAMA
6. MARRIAGE CERTIFICATE
7. CENSUS FORM
8. BANK DETAILS (CHQ COPY)
9. FATHER JAMAT CARD & N.O.C REQUIRED (IN CASE OF D/D)

IMPORTANT INSTRUCTION

1. PLEASE ENSURE ALL REQUIRED INFORMATION IS PROVIDED
2. PARENTS MUST ACCOMPANY THE STUDENT INTERVIEW
3. DECLARATION MUST BE READ

DECLARATION

I Here confirm that I have accurately provided all necessary information on this education scholarship form, including my bank details and understand that the responsibility for the accuracy and security of this information lies with me.

SIGNATURE OF PARENTS