



# VANTHALI MEMON ASSOCIATION

## HIGHER EDUCATION FORM FOR FINANCIAL SUPPORT

Latest  
photograph of  
applicant

### Part I

VMA Card No. \_\_\_\_\_

#### 1) Details of Applicant

Full Name (in capital letters)		Father's / husband's / Guardian's Name:		Surname
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	NIC Number		Date of Birth	
Residential address:				
Telephone No (PTCL)	Mobile Number (Self)	Mobile Number (parent)	Email ID	

#### 2) Educational Background of Applicant

Qualification	Institution from where qualified	Grade/Division/ Rank	Main Subjects	Year of Passing

#### 3) Details OF Degree / Diploma

Class/ Discipline	Name of college/universities targeted for admission	Total No. of years/Semester/Paper	Semester starting date	Completion period
Why above discipline (degree/diploma) have been selected. Briefly elaborate reason of selection and its future prospects.				

#### 4) Detail of Education Expenses:

##### a. For Bachelor/Master Degree Program

Admission Fee	Per Semester/Period Payment	Payment Quarterly / Half Yearly / Annually	Others Charges	Total Present Payment	Last Date of Payment	Approx. Total Cost of Degree/Discipline

##### b. For Professional Degree Program

No. of paper to be Attempted	Registration Fee	Examination Fee	Institute/ tuition fee	Others Charges	Total Present Payment	Last Date of Payment	Approx. Total Cost of Degree/Discipline

#### 5) Support from any other Institution (If any).

Class / Discipline	Name of the Institution	% Percentage	Amount

#### 6) Working Experience of Applicant (if any)

Employer	Period		Position / Designation	Income per month
	From	To		

## Part II

### 7) Details of Family Members

S. No.	Name	Educational Qualification	Phone No.	CNIC #	VMA Card No.	Relationship with Applicant

### 8) Detail of Brothers and Sisters studying/completed through financial support of VMA and other institutions

S. No.	Name Family Members	For School/College/ University	From VMA (Amount Rs.)	Other Institutions	(Amount Rs.)

### 9) Declaration

**I hereby declare, confirm and understand that: -**

- The information given above is true and correct. Any incorrect information will result in rejection of my application.
- VMA-HEC found any information provided by me incorrect or misleading during the period of education financial support, the VMA is authorized to suspend/discontinue financial support of scholarship including if I am found to engage in any illegal or unethical activities.
- VMA Higher Education Committee has the right to approve or reject the application without assigning reason thereof.
- I will secure admission for higher education with approved Educational Institutions of VMA-HEC.
- That payment of semester/periodical fee will be paid through cross cheque/pay order in the name respective educational institute.
- That if at any point of time if I am able to continue my education without any financial assistance, I will discontinue availing the facilities approved by VMA-HEC and intimate VMA accordingly.
- Jamat Card of male applicant will be basic requirement of processing of application.
- Processing of application will be required at least 2 to 3 weeks at VME-HEC.
- I/We understand that above education support being made by "Zakat Fund" of VMA and I/we hereby declare that I/we deserve for said fund.
- I/We have read and understand all above terms and conditions for educational financial support program.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parents**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Date**

**CHECKLIST:**

- |   |                              |
|---|------------------------------|
| 1. Answered all questions. Additional information, if any is attached.                          | Yes <input type="checkbox"/> |
| 2. Last Examination Transcript, Mark-sheet or Report Card attached                              | Yes <input type="checkbox"/> |
| 3. 1 recent 1" X 1" size photograph of applicant pasted.  | Yes <input type="checkbox"/> |
| 4. Copy of CNIC of applicant.   | Yes <input type="checkbox"/> |
| 5. Copy of the (Self/Father/Guardian's) Membership Card of Vanthali Memon Association Attached. | Yes <input type="checkbox"/> |

**IMPORTANT INSTRUCTIONS:**

- Application forms must be submitted 4 weeks before the due date of payment.
- Please bring original documents on the day of interview.
- Please use separate sheets for answers if the applicant find space provided in the form is insufficient
- Both Parents must accompany the Applicant for interview.

Address of Association and contact details: -

**Vanthali Memon Association**

Plot no.242, Isardar Street near Fatima homes,  
Pakola masjid Opp. Aman Tower Garden East, Karachi  
PTCL: 32244213 -32244214 Mobile No. 0335 2774248  
Email: [vma.hec@vanthali.org](mailto:vma.hec@vanthali.org)  
Web: <https://www.vanthali.org>

# Part III

## FOR OFFICIAL USE ONLY

VMA Card No. \_\_\_\_\_

Full Name	Father's / husband's / Guardian's Name:	Surname

Application received by \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Call for Interview  Hold  Reject

Called for Interview on: \_\_\_\_\_

### Remarks of Higher Education Committee after interview of applicant

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### Signature of Committee Members

**Name**

**Signature**

**Date**

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