

Applicant's Information:

## Application Form for Tuition waiver under Special Quota

## Minimum Eligibility Criteria to apply:

Program	Minimum Credit (to be completed)	Minimum CGPA (at the time of application)	Waiver Status
Undergraduate Program	63	3.00	Not more than 20% at the
Graduate Program	28	3.00	time of application

Name of th	ne Stude	nt:						St	udent ID	#		
Program:	BBA	MSJ	ENG	CSE	ETE	EEE	MBA	EMBA	M. Com	ın.	MA in Eng	
Waiver Sta	ıtus:	per	cent at t	he tim	e of app	olication.						
Permaner	nt Addre	ess:				Р	resent	Address:				
•••••						•••						
Are you a p	oermane	ent resid	ent of D	)haka?		YES	NO					
Have you a		_					.AB prev	-		NO		
If Yes, in w	nich ter	m: Sp	oring		Summ	er		Fall				
Did you ge If Yes, at v	•		•		YES	NO						
		_										
Parent's I												
Father's Na	ame:						P	rofession:				
Mother's N	ame:						P	rofession:				
Cost of ec	ducation	at ULA	AB borr	ne by:	Parer	nts	Others					
If others th												
Cil-lin i	·	elationshi				(Name)		(Pro	ofession)			
<u>Siblings I</u>	<u>ntorma</u>	tion:	Nu	imber:								
Status: S	Student.		I	Employ	ed		Others.					

Signature of the Applicant

Date:



## Declaration of the Student Relating to Financial Background

I am providing the following information in support of my application for tuition waiver from ULAB:

a.	Relationship with the person(s) bearing the cost of education:							
b.	Profession of the person bearing the cost of education:							
C.	Number o	of brothers	and sisters:			_		
		brotl					sisters	
d.	Number of	of brothers	and sisters st	tudying in:	univer	sity	:	
					college	9	:	
					school		:	
e.	Location	of my:						
	i. Co	ollege:	rural	urban				
	ii. So	chool:	rural	urban				
f.	NID card	number:						
g.	Members	in the fami	ly:					
				Adult		Childre	n	
h.	Number o	of earning n	nembers in th	ne family:				
i.	Address:							
	<u>Permanent</u>					<u>Present</u>		
Signat	ture with d	ate						
Name:								
ID:								
Prograi	m:							



D∈	eclaration of I	ather/Mother/Guardi	an Relating to Fir	nancial Background
1,	(na	me of father/mother/guardian)	am providing	the following information
in su	pport of the a	pplication of my son/dau	ghter/brother/sister/	for (if others, please specify)
tuitio	n waiver from yo	our university:		()
a.	Profession:			
b.	Source of Inco	ome:		
C.	TIN certificate	number:		
d.	NID card num	ber:		
e.	Number of me	mbers in the family:	Adult	
f.	Number of ear	rning members in the family	y:	
g.	Address:	<u>Permanent</u>		<u>Present</u>
 Signa	ture with date			
Docun	nents enclosed:			
	Photocopy of	of TIN certificate, as appropria	te;	
	Photocopy of	of NID;		
	Salary/inco	me certificate, as appropriate.		