



THE INSTITUTION OF ENGINEERS PAKISTAN SAUDI ARABIAN CENTER (IEP-SAC)

Scholarship Program for Students in Pakistani Engineering Universities and Colleges

SELECTED STUDENT DATA FORM

The Vice Chancellor of the concerned University or Principal of the concerned College will complete this form and send to IEP-SAC for Scholarship Program after which IEP-SAC will transfer the funds to the University/College Account for the distribution to the selected deserving students.

1. NAME: _____

2. FATHER'S NAME: _____

3. DATE OF BIRTH: _____

4. PRESENT ADDRESS: _____

5. PERMANENT ADDRESS: _____

6. N.I.C. NUMBER:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

7. REGISTRATION NO.: _____ 8. DISCIPLINE: _____

9. SESSION START DATE: _____ 10. EXP. SESSION END DATE: _____

11. ACADEMIC RECORD:

Examination Passed	Year	Marks Obtained / Total	Division / Grade	Name of Board / University	Position, if any.
MATRIC/SSLC					
F.A./F.SC/HSSLC					
B.A/B.SC/OTHER					

I hereby recommend the student whose data is given above for the IEP-SAC Scholarship Program for Students in Pakistani Engineering Universities and Colleges. All future correspondence on the subject may please be addressed to me / the official (Contact Person) whom I have authorized and whose name and designation is given below. I will advise IEP-SAC in case the contact person is changed. Also given below are the details of the University / College Bank Account to which you may transfer the Scholarship Funds.

DETAILS OF THE AUTHORIZED OFFICIAL (OF UNIVERSITY / COLLEGE):

NAME: _____ DESIGNATION: _____

ADDRESS: _____

BANK ACCOUNT DETAILS (OF THE ABOVE AUTHORIZED OFFICIAL):

NO. _____ BANK : _____ BRANCH / CITY: _____

CERTIFICATION BY HEAD OF THE INSTITUTION:

NAME: _____ DESIGNATION: _____

INSTITUTION: _____

OFFICIAL SEAL AND SIGNATURES: _____ DATE: _____

Note: Please enclose attested and stamped copies of items 6 and 11 of Data Form