



## CHECKLIST

**OVERSEAS SCHOLARSHIP**  
**Mirpur University of Science & Technology (MUST), Mirpur AJK**  
**MUST UP-GRADATION PROJECT**  
Phone: 05827-961066-7 Fax: 05827-961039, E-mail: [pd@must.edu.pk](mailto:pd@must.edu.pk)

*The Applicant to complete this Checklist and submit on top of Application Form  
(Answer by YES or NO in "Column 3")*

Sr. No	Particulars	Column 3 Yes/NO
1	AJK/ Pakistani National	
2	Age <b>35 years or less January 20<sup>th</sup>, 2017</b> (if not faculty member or employee) <b>OR</b> Age <b>40 years or less January 20<sup>th</sup>, 2017</b> (if faculty member or employee)	
3	Minimum <b>16 years</b> of academic education - (For MS full foreign <b>OR</b> Minimum <b>18 years</b> of academic education - (For Ph.D. Full Foreign/Foreign + Split)	
4	Application Form submitted through proper channel - (if faculty member or employee and the employer undertakes for relieving of Applicant if selected for Scholarship)	
5	50% or above marks valid Test Score in the GAT General Test	
6	Minimum sixteen (16) year of education (BE/BSc /BS Engg) for MS and eighteen (18) year of education for Ph.D with first division or 2.5/4.00 CGPA or 3.5/5 score whichever is applicable.	
7	Maximum two second divisions (not less than 50% marks) throughout the academic career	
8	Currently, in receipt of any other Scholarship	
9	Secured admission in Ph. D Full Foreign or MS Full Foreign in the specified discipline/field in the HEC identified /approved Universities	
10	Medical fitness to pursue the course of studies	
11	As per the Advertisement attached all required documents' attested copies and photographs with Application	

➤ Application for (Tick Appropriate): **Ph. D Full Foreign**  **Ph. D (Foreign + Split)**  **MS Full Foreign**

➤ **Discipline / Field (Write / Print the Course of Studies)** \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

CNIC Number (Computerized): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# APPLICATION FORM

## FOREIGN SCHOLARSHIP

Mirpur University of Science & Technology (MUST), Mirpur AJK  
**MUST UP-GRADATION PROJECT**  
Phone: 05827-961066/7 Fax: 05827-961066 E-mail: [pd@must.edu.pk](mailto:pd@must.edu.pk)

Affix 1 photo here  
and attach 3 photos  
(Color photograph)

**PRINT OR WRITE IN BLACK**

### 1. APPLICANT'S AGE CATEGORY (Please check to only one category)

- Full time faculty members of Universities / Colleges and employees of the public sector R & D organization
- All others

### 2. Process Fee (Rs. 500/-) - Payment in favor of the Treasurer - MUST

Bank Draft No / Online Payment Receipt		Bank Name		Branch code	
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### 3. Scholarship Applied for: (Tick only one)

A	PhD - Full Foreign (04 Years)	<input type="checkbox"/>	B	Ph.D (Local + Foreign) (02 + 02 Years)	<input type="checkbox"/>	C	MS-Full Foreign (02 Years)	<input type="checkbox"/>
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### 4. Discipline / Field (Tick only one)

#### A-Ph.D (Full Foreign)

- Computer System Engineering
- Software Engineering
- Civil Engineering
- Mechanical Engineering
- Electrical Power Engineering
- Computer System & Information Technology
- Economics

#### B-Ph.D (Local + Foreign)

- Computer System Engineering
- Software Engineering
- Civil Engineering
- Mechanical Engineering
- Business Management
- Computer System & Information Technology
- Economics

#### C-MS (Full Foreign)

- Computer System Engineering
- Software Engineering
- Civil Engineering



**i. Address for correspondence**

Application processing takes several months up to issuing the decision on Scholarship Award. Therefore, a valid address is essential for delivery of correspondence. Non delivery of correspondence due to address problem may deprive Applicant's availing of the scholarship opportunity.

<b>House No &amp; Street</b>	
<b>Town/City/Village</b>	
<b>District/Province/Area</b>	

**j. Telephone Numbers**

<b>Home</b>		<b>Office</b>	
<b>Mobile</b>		<b>Fax</b>	

**k. Permanent Address** (if different from the address above):

This address will be used for reference correspondence and/or for emergency contacts

<b>House No &amp; Street</b>	
<b>Town/City/Village</b>	
<b>District/Province/Area</b>	

**9. ACADEMIC QUALIFICATIONS**

Educational Qualifications	Awarding Institution	Pass-out Year	Marks			Division / CGPA
			Total (a)	Secured (b)	% (b) of (a)	
Higher Secondary School Certificate /Intermediate/'A' Level (12 years)						
Bachelors (BA, BS, B Sc (Hons), other equivalent) (14 & 15 Years)						
Masters (MA, MSc, BS other equivalent) (16 Years)						
M. Phil / MS / ME / M Sc (other equivalent) (18 years)						

**10. Valid GAT (General) TEST:**

	ENGLISH	ANALYTICAL	QUANTITATIVE	ACCUMULATIVE
<b>Test Score</b>				
<b>Percentile Score</b>				

**11. EMPLOYMENT INFORMATION** (If Applicable)

**Current Position**, if you are currently working please write down the following details:

a. Title of position held

(Day/month/year)

(Day/month/year)

b. Duration of Employment

To

c. Name of the Organization

d. Address of employer organization

e. Your Brief Job Description

**12. FOR EMPLOYED APPLICANTS ONLY**

**CERTIFICATE BY THE AUTHORITY OF EMPLOYER**

This is to Certify that Mr./Ms. \_\_\_\_\_ Son/Daughter of Mr. \_\_\_\_\_ has been employed in this Organization as \_\_\_\_\_ Since \_\_\_\_\_.

His/Her educational, employment particulars and other statements as stated in the foregoing columns have been checked and verified with the original documents. It is hereby affirmed that in the event of his/her selection for the award of 'Foreign Scholarship, he/she will be released on study leave for the total duration of the MS/PhD study program which on average is two (2) and four (4) years respectively.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Forwarded Copy

Name & Designation: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Office Stamp: \_\_\_\_\_

Full Address: \_\_\_\_\_

**13. UNDERTAKING BY THE APPLICANT (compulsory for all candidates)**

I Mr./Ms./Mrs \_\_\_\_\_ Son/Daughter of Mr. \_\_\_\_\_ declare that the statements made by me in this Application Form are true, complete and correct to the best of my knowledge and belief. It is solemnly affirmed that I have read and understood the conditions of the award of this program advertised in the press and from the web page of MUST and that the decision of the University Scholarship Management Committee (USMC) shall be final and binding. I understand that the award shall be withdrawn as well as recovery made of costs incurred on me in connection with the award, if any misrepresentation or omission or misconduct attributable to me directly or indirectly in my favor as beneficiary, is discovered even after my selection for scholarship award.

Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

C.N.I.C Number \_\_\_\_\_