COMSATS University Islamabad,
Wah Campus

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Near Barrier No 5, G.T Road Wah Cantt Ph: (92-51) 4534200-2,(92-051) 9314482 Fax: (92-51) 4546850

CUI Employee Pecuniary
(Application Form)

Session: Fall/Spring…….

(a) Particulars of the Applicant

Name:----------

Program of studies:----------

Registration/Form # ---------- Current Semester:----------

Father's / Guardian's / Spouse Named:---------- Father's CNIC#----------

Address:----------

PTCL #:---------- Mobile # ----------

Financial Support Requested for the Semester Spring / Fall ----------

(b) Particular of the CUI Employee

Name:----------

Designation:----------

Department/Section:----------

Relation with applicant----------

Date of joining CUI:----------

Declaration

The information given in this application is true to the best of my knowledge and I understand that any incorrect information will result in the cancellation of this application. If any information given in this application is found incorrect or false after the grant of the financial support, will have to refund all payment received and a penalty levied.

The CUI reserves the right for verification of the information given in this form.

_____
Signature of Student
Date:

Countersigned:
Parent / Guardian / Spouse

(c) Certificate of the Employer

It is certified that Mr/Ms----------CNIC #----------is an employee of CUI ---------- Campus working in OG/SG scale----------. He/She has been working in CUI since----------.

Incharge HR Section

Respective Campus

Date:----------

For Use of the SFAO, CUI Wah Campus

Mr/Ms.----------S/D/o----------,bearing Registration/Form# ---------- Semester----------of----------program has applied for 100% tuition fee waiver for the semester---------- as CUI Employee's Son/Daughter/Spouse out of Taleem Fund under the CUI Employee's Pecuniary Program.

Approval of competent authority is requested.

Incharge SFAO
CUI Wah Campus
Date:----------

Addl. Registrar. (CUI Wah Campus)

Director Campus. (CUI Wah Campus)