AFFIDAVIT
(Must be printed on Stamp Paper of Rs. 50/)

I	S/0, D/0
appl	ied for the financial assistance facility under SBBU Merit Cum Need Based
Scho	larship Program.
Sch	planship for the study of
	olarship for the study ofGraduate / Post-luate course at
hereby declare / undertake that:	
nere	by declare / undertake that.
1.	I understand that submission for this application does not guarantee the award of financial assistance, nor does it absolve me of any financial responsibility in relation to study.
2.	That information given in this application is complete and true to the best of my knowledge. I understand that concealing information or providing incorrect information will result in denial of financial assistance and may also result in strict disciplinary action.
3.	I agree to abide by the decision of the Financial Assistance Committee.
4.	I will complete the above-mentioned course with full devotion in specified period and secure good result.
5.	I shall refrain from engaging in any Political, Criminal or any other activity incompatible with any work program.
6. 7.	I shall abide by the rules and regulations of the Institute / University. I also undertake that I am not overseas / Self-Financed student.
8.	I shall not claim the scholarship if awarded after completion of degree/ Pass out from the institution.
9.	I further undertake that none of my sibling (brothers or sisters) is currently availing the SBBU Merit Cum Need Based Scholarship from SBBU, SBA.
10.	I understand and agree that if it is found at any stage that any of my siblings is availing the SBBU Merit Cum Need Based Scholarship from SBBU, SBA. I shall be liable to return the full amount of scholarship received under this scheme. In case of failure the Shaheed Benazir Bhutto University, Shaheed Benazirabad reserves the legal right to initiate proceeding against me.

Signature of Student

CNIC No.____

Signature of Parents / Guardian

CNIC No.