

AFFIDAVIT

[Applicant Name and CNIC]

[Applicant Address]

[City, Postal Code]

To Whom It May Concern:

I, [Applicant Name], son/daughter of [Father's Name], CNIC Numberresident of [Applicant Address], do hereby solemnly affirm and declare as follows:

1. I hereby declare that all the information provided in my application for the Honhaar Undergraduate Scholarship Program is true, accurate, and complete to the best of my knowledge and belief.
2. I confirm that my monthly family income does not exceed PKR 300,000 (Pakistani Rupees Three Hundred Thousand).

I make this affidavit in good faith and understand that any false information or misrepresentation may lead to disqualification from the Honhaar Undergraduate Scholarship Program and legal action.

Deponent

[Applicant Name]

[Signature of Deponent]

Witnessed by:

[Witness's Name]

[Witness's Address]

[Witness's CNIC Number]

[Signature of Witness]

[Date]

[Place]