

BASELINE QOL APPLICATION DETAILS

Form No: 1

APPLICATION INFORMATION

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|-----------------------|------------------------|-------------|-----------|
| Application ID: | 1 | Form No: | 1 |
| Total Family Members: | 4 | Remarks: | sdfsdfsdf |
| Created At: | 12/14/2025, 6:46:10 PM | Created By: | admin |

FAMILY HEAD 1

| | | | |
|------------------------------|--------------|----------------------|-----------------|
| Full Name: | Karim Fayazi | Person Role: | Head |
| Date of Birth: | 1/2013 | CNIC No: | 42101-4466917-3 |
| Mother Tongue: | Sina | Primary Contact No: | 23423423 |
| Regional Council: | N/A | Local Council: | dfgdfg |
| Current JK: | gdfg | Residential Address: | asdfsdf |
| Primary Location Settlement: | dfgdfg | Area of Origin: | dgdgf |
| House Status: | N/A | | |