**NOMINATION FORM – GRANT FOR UNPRIVILEGED**

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| **NOMINEE** | | | |
| **First Name:** |  | **Last Name:** |  |
| **Address:** |  | | |
| **City:** |  | **District:** |  |
| **Country:** |  | **Phone:** |  |
| **NOMINATOR** | | | |
| **First Name:** |  | **Last Name:** |  |
| **Phone:** |  | **Email:** |  |
| **QUESTIONAIRE & REFERENCES** | | | |
| **A. Please tell us few actions that the nominee performs which show that the nominee is conscious of Allah (swt).**  **B. Please tell us briefly about the nominee, how many family members the nominee has, nominee’s profession, how much nominee earns every month and how nominee currently maintain his/her family.**  **C. Please tell us your project plan that can help nominee to overcome the difficult time and how much would it cost to implement the project?**  **D. Provide one reference who knows the nominee and his family very well.**  1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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| **SIGNATUARE OF THE NOMINATOR** | | | | |
| **☒** | **I do hereby certify that above information is correct and true and my nominee is unprivileged.**  *NOTE: To sign this form electronically, please type your first name and last name within forward slash (e.g. /ABDUR RAHMAN/ , wherein ABDUR is first name and RAHMAN is last name )* | | | |
| **Signature:** | |  | **Date:** |  |