Application Details

Personal Details

First Name*	Middle Name	Last Name*
Wasda	asdasd	asdas
Date of Birth* 2007-01-09	Email* arhamabeerahmed+4@gmail .com	Contact Number* +92 336 9274699
Total Household Members*	House Status*	Home Address*
2	rented	das
Annual Income*	Annual Income Currency*	
Dependent 1		
Name*	Age	Relationship*
test	22	test
Occupation* test	Annual Income*	

Dependent 2		
Name*	Age	Relationship*
test		test
Occupation*	Annual Income*	
test	0	
test		

Academics Details

Institute Name*	Affliate University*	Institute Website*
test	test	www.braincrop.net
Institute Address*	Course of Study*	Current Year of Study*
test	test	1
Duration Of Course (In Years)*	Program Start Date*	
2	2025-01-21	

Education Expenses Details

Currency*

AUD

Expense	Year 1	Year 2	Total
Tuition Fees	233	232	465
Lodging/Boarding	23	232	255
Books	323	232	555
Other Expenses	3232	3232	6464
Financial Aid from any other sources	323	23	346

Documents Details

NIC Image*

Passport Size Picture*

Admission Letter*

Marksheet*

Income Verification*

Tuition Fee Schedule

Fee Receipt

Miscellaneous Expense

No Image

No Image

Reference Details

Reference Detail 1		
Name* test	Email test@twst.com	Phone Number* +92 336 9455585
Relationship with Applicants* test	Reference Letter*	

Authorization Details

Have you or anyone in your house p	reviously applied to the Shukre Ilahi S	cholarship Program?*
asdasd		
Have you applied for any other scho	plarship or loans?If so what is your rep	ayment process*
asdasd		
Please tell us why Shukre llahi should	d consider your application (less than	100 words)?*
asdasdas		
How did you learn about the Shukre	llahi Scholarship?*	
dasd		
What do you plan to do after your gr	raduation?*	
asdasdasd		
Submited Date* 2025-01-15	IP Address* 202.47.32.30	Signature*