

**FEDERAL EMPLOYEES BENEVOLENT AND GROUP INSURANCE FUNDS
BENEVOLENT FUND BUILDING, BLOCK C-II, NEAR ZERO POINT,
P.O.BOX NO.2035, ISLAMABAD**



FEB & GIF

**APPLICATION FOR GRANT OF EDUCATIONAL STIPEND / FEE
REIMBURSEMENT**

(For post Matric studies excluding PhD)

PART-A

PARTICULARS OF EMPLOYEE:-

| | | | | | | | | | | | | | | | | | | | | | |
|---|----|---------------------------------------------------------------------------------|----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--------------|--|--|
| 1 | a) | Name of Employee (in block letters) | | | | | | | | | | | | | | | | | | | |
| | b) | Designation | | | | | | | | | | | | | | | | | | | |
| 2 | | CNIC No. | | | | | | | | | | | | | | | | | | | |
| 3 | | CNIC of Husband (Incase of Female Employee) | | | | | | | | | | | | | | | | | | | |
| 4 | | Department; with complete Postal address and contact No. | | | | | | | | | | | | | | | | | | | |
| 5 | | Place of Last Posting | | | | | | | | | | | | | | | | | | | |
| 6 | | Bank A/C No. of Employee | | | | | | | | | | | | | | | | | | | |
| 7 | a) | Basic Pay Scale | | | | | | | | | | | | | | | | | | | |
| | b) | Status of employee | Gazetted | | | | | | | | | | | | | | | | Non-Gazetted | | |
| 8 | | Particulars of the stipend, if any, received last year from the FEB & GIF | Amount | | | | | | | | | | | | | | | | | | |
| | | | Class | | | | | | | | | | | | | | | | | | |

Certified that the application is preferred first time for payment of Educational Stipend for the year _____

2. I hereby solemnly affirm that the above information is correct to the best of my knowledge and belief.

Dated: _____

(Signature of the employee)

PART-B

(To be filled in by the Head of Department of the employee)

No. _____

Dated:- _____

Certified that Mr./Mrs. holds the post of
in this office and that his/her basic pay scale at present is BS-..... (Gazetted / Non-Gazetted).

**Signature and by name seal of
Head of the Department**

In case of retired/deceased employees certificate at part-B is not required. They may attach an attested copy of Pension Order, (1st, 2nd & Last page of Pension Book or attested copy of retirement order and LPC).

PARTICULARS OF STUDENT

| | | | | | | | | | | | |
|---|------------------------------------------------|--|--|--|--|--|--|--|--|--|--|
| 1 | Full name of the Student (in block letters) | | | | | | | | | | |
| | | | | | | | | | | | |
| 2 | Father's name | | | | | | | | | | |

4. Particulars of present studies:-

| Name and address of the institution where studying | Name of the Board, University or Department recognizing the Institution | Class & Semester of present study | Present subjects of study | Date of commencement of the academic session | Duration of the course |
|----------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------|---------------------------|----------------------------------------------|------------------------|
| | | | | | |

5. Previous academic record (starting from the last examination passed).

| Name and address Of the Institution(s) last attended | Examination passed | Date of passing the examination | University/ Board | *Marks obtained | | |
|------------------------------------------------------|--------------------|---------------------------------|-------------------|-----------------|----------|---|
| | | | | Total | Obtained | % |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

*Marks obtained are essentially required alongwith Grade/GPA.

Postal Address and Contact No of Parents.

(Signature of the Student)

PART-D

(To be filled in by the Head of the Educational Institution where the student is on roll)

Certified that Mr./Miss S/o/D/ois a bonafide student of this Institution, studying in Class..... and that the particulars furnished by him/her in Part "C" of this application form are correct.

2. Certified that Mr./Miss S/o/D/o had obtained marks out of total marks of.....in term of percentage in the last examination (either present institution or Board/University). His/her date of admission to the present program is

3. Certified that this institution is a Government Institution/Accredited Private Institution recognized by the Government of /Intermediate & Secondary Board/University or Higher Education Commission, Islamabad.

4. Certified that Mr/Miss.....has got admission in this institute on merit and not on self finance basis (for fee reimbursement cases only).

Postal Address and Contact No. of Institution:

Signature and by name Seal of
Head of the Institution

Attested copies of the following documents are to be submitted alongwith application.

- Detailed marks sheet of the last examination passed (02 copies).
- Detailed Marks Certificates & Degree of student. (02 copies).
- CNIC or Form 'B' of the student.
- CNIC of employee.
- In case of female employee, CNIC of her Husband.
- University/Institution admission offer letter for stipend under Cat-IV & fee reimbursement.
- Original Bank paid fee Challans for fee reimbursement (02 copies).
- Latest pay slip of employee showing complete detail of BF & GI deductions (02 copies).
- Death Certificate of deceased employee.
- Case may be submitted through parent Department with covering letter.
- Office order of retirement (in case of retired employees).