**FEDERAL EMPLOYEES BENEVOLENT AND GROUP INSURANCE FUNDS**

**BENEVOLENT FUND BUILDING, BLOCK A-I, ZERO POINT,**

**P.O. BOX NO. 2035, ISLAMABAD**

**APPLICATION FORM**

**ESSAY WRITING COMPETITION**

Enrolment No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PART-A**

**YEAR OF COMPETITION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Particulars of the employee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a) | Name of employee (in block letters) |  | |  | |  | |  | |  | |  | | |  | |  | | | | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | | |  | |  | | | | |  | |  | |  | |  | |  | |  | |  | |
| b) | CNIC No. |  | |  | |  | |  | |  | | **-** | | |  | |  | | | | |  | |  | |  | |  | |  | | **-** | |  | |
| c) | Designation |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d) | Basic pay scale |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| e) | Parent Deptt / organization with complete address |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| f) | Contact No. of the employee |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| g) | Postal Address of the employee |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| h) | Bank  Account No. | Bank Name with Branch: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | |  | |  | | |  | |  | | | |  |  | |  | |  | |  | |  | |  | |  | |  |
| 2. Particulars of the student | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a) | Name of the student (in block letters) |  | |  | |  | |  | |  | |  | | |  | |  | | | | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | | |  | |  | | | | |  | |  | |  | |  | |  | |  | |  | |
| b) | CNIC/B Form No. |  | |  | |  | |  | |  | | - | | |  | |  | | | | |  | |  | |  | |  | |  | | - | |  | |
| c) | Date of birth |  | |  | | **-** | |  | |  | | | **-** | |  | | |  | | | |  | |  | | **-** | | | | | | | | | |
| d) | Class of present study (tick the relevant level ) | Matriculate  or equivalent | | | | | | | | | | | | | | | | | Undergraduate  or equivalent | | | | | | | | | | | | | | | | |
| e) | Name and address of the Educational Institution where student is studying |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| f) | Topic of the Essay |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| g) | Essay (Language) | Urdu | | | | | | | | | | | | | | | | | English | | | | | | | | | | | | | | | | |

Dated : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Name & signature of Student) (Name & signature of the employee)**

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**PART-B**

**To be filled in by the Head of the Educational Institution where the student is enrolled**

Roll No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_

Certified that Mr./Miss.­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_S/o, D/o \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a bonafide regular student of this Institution, studying in Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and particulars furnished by him/her at Serial No. 2 of Part “A” of the Application Form are correct. It is also confirmed that script of the subject Essay has been narrated by the said student as per his own ability without any support of the other persons/plagiarism. The original copy of essay is enclosed.

**Signature and Seal of**

**Head of the Institution**

**PART-C**

**To be filled in by the Head of the Department of the employee**

**(In case of retired/deceased employee, no need to fill it)**

No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated : \_\_\_\_\_\_\_\_\_\_\_\_\_

Certified that the information contained in Serial No. 1 of part “A” of the Application Form in respect of Mr/Miss/Mrs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is correct according to our record.

2. Certified that the above named employee is neither a contingency/work charged/adhoc/contract employee nor a deputationist from any Provincial Government and he is a regular contributor of FEB & GI Funds. (In case of a deputationist from one Federal Government department to another, the case will be preferred by his parent department).

3. Please attach the following:

1. **CNIC of employee.**
2. **CNIC or Form B of student.**
3. **Certificate of last Board Examination of the student.**

**Signature and Seal of**

**Head of the Department/Authorized Officer**

**PART-D**

**In case of retired/deceased employee**

The retired employees or family of the deceased employees will provide the following documents:

1. **CNIC of the applicant.**
2. **CNIC or Form B of student.**
3. **Copy of Pay Slip/Pension Payment Order of employee or family members or Benevolent Grant Payment Order Card as the case may be.**
4. **Certificate of last Board Examination of the student.**

**Signature of the Applicant**