



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

APPLICATION FOR EDUCATIONAL GRANT

UNDER RULE 25 AND 25-A OF THE FEB & GIF RULES 1972

(For children of serving/retired/deceased employees studying
in post matric studies excluding PhD)

PART-A

1. i. Name of employee _____
ii. Father Name _____
iii. Date of Birth of employee _____
iv. CNIC No. of Employee _____
v. CNIC No. of Husband in case of Female Employee _____
vi. Designation _____ BPS

Gazetted	Non-Gazetted
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vii. Personal No. of Employee (as mention at the monthly pay slip) _____
viii. Status of the employee.

Permanent	Temporary	Deputationist
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2. Present status of employee (tick relevant column)

In service	Retired			
	Superannuation	Normal retirement	Retirement on medical grounds	Compulsory retirement

3. Detail of pay

Basic Pay	Special Pay	Technical Pay	Personal Pay	Qualification Pay	Senior Post Allowance	Any Other Pay reckonable for pension	Total Pay

4. Monthly subscription of the following grants

Benevolent fund subscription (Amount in Rupees)	Group Insurance Fund subscription (Amount in Rupees)

5. Name of present department _____
6. Place of current posting _____
7. Name of parent department _____
8. Status of department (tick relevant column) ✓

Federal Government				Autonomous	Semi Autonomous body	Corporation	Others
Ministry	Division	Attached Department	Sub ordinate office				

9. Service History

Date of entry into government service	Date of initial appointment	Date of retirement/ superannuation	Period for which contribution of Benevolent Fund and Group Insurance was not paid	
			From	To

10. Date of Retirement _____ 11. Date of death of employee in service _____
12. Date of death after retirement _____ 13. Present Address. _____
14. Permanent Address. _____
15. NBP Bank A/C title and No. for credit of grant
i. Bank Account title: _____
ii. Bank Name: _____ Branch Code () Address of Branch _____
City: _____

iii. Account No.

16. Name of widow /spouse /beneficiary of the employee (in case of death of employee after retirement) _____

17. Father's/Husband's name _____

18. Relation with the employee _____

19. CNIC of spouse/beneficiary

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20. Particulars of the education grant received last year from the FEB & GIF (tick relevant box)

Education stipend/other benefit post Matric studies excluding PhD under Rule 25 of FEB & GIF Rules, 1972			Fee reimbursement specified for children of serving/retired employees studying in BS to MS / MPhil level Degree Programmes specified under Rule 25-A of FEB & GIF Rules, 1972		
Amount	Class/Degree programme	Semester / Year	Amount	Class/Degree programme	Semester / Year

EMPLOYEE/SPOUSE/BENEFICIARY'S UNDERTAKING

I hereby solemnly affirm that:

- i) The application is submitted for the first time for payment of Educational Stipend/fee reimbursement for the year _____
- ii) I have been contributing to Benevolent Fund & Group Insurance Fund as per prescribed rates.
- iii) The above information is correct to the best of my knowledge and in case of any misleading information, I shall be responsible.

Dated: _____

(Signature of the employee/spouse/other beneficiary)

PART-B

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

F. 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) and is a regular contributor of B.F& GIF prescribed rates @ Rs.____ & Rs._____ since_____. The contents/information at Part-A above is correct as per record of this office and he is neither a deputationist from any provincial government nor an Armed forces uniform wearing employee.

In case of any incorrect/fake information, the department / applicant shall be responsible and blacklisted for future benefits from this office and liable be preceded against under the rules.

(
**Signature and by name Stamp of
Head of the Department/Authorized Officer
(BPS 20 or above)**

-: 3 :-
PART-C

1. PARTICULARS OF STUDENT

Student Name (in block letters)								Father Name (in block letters)								Relation Son/Daughter	

2. CNIC OF STUDENT

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3. REGISTRATION NO. _____

4. PARTICULARS OF PRESENT STUDY

Name and address of the institution where studying	Name of Board / University which has Accredited the institution	Certificate / Degree	Year of present studies / (In case of semester system, please write No. of present semester e.g. 1 st , 2 nd , 3 rd)	Date of commencement of the study program applied for payment	Duration of the Certificate / Degree

5. DETAIL OF LAST CERTIFICATE/DEGREE/POSTGRADUATION FROM BOARD / HEC RECOGNIZED UNIVERSITY/INSTITUTION/COLLEGE

Name and address of the Institution last attended	Name of last examination passed	Academic Session	Board / University	Marks / CGPA obtained			Passed in Annual / Supplementary examination
				Total	Obtained	%	

6. POSTAL ADDRESS AND CONTACT NO. OF EMPLOYEE/BENEFICIARY/APPLICANT

Postal Address: _____
 Telephone No. _____ Mobile No. _____
 Email (if any): _____

(Signature of the Student)

PART-D

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

- Certified that Mr./Miss S/o/D/o is a bonafide student of this college / institution / university, studying in Certificate / Degree programme of..... in year / semester and that the particulars furnished by him/her in Part "C" of this application form are correct.
- Certified that Mr./Miss S/o/D/o had obtainedmarks / CGPA during last year of studies / last two semesters, out of total marks / CGPA of.....which in term of percentage comes to.....%. His/her date of admission to the present programme is
- Certified that this college / institution / university is a Public /Private sector college / institution / university, recognized by Board/ HEC / affiliated with HEC recognizedUniversity.

Postal Address and Contact No. of College / Institution / University:

**Signature and by name Stamp of
Head of the College / Institution / University**

Note:- It is clarified that if your child is studying in professional disciplines in public sector universities / colleges / institutes as specified in Rule 25-A then you are allowed to apply either for the benefit of Fee Reimbursement or for the benefit of Stipend (rate of educational stipend in professional studies at present is Rs. 40,000 per academic year per student on obtaining 70% marks), for your maximum of two children in a financial year. Both of the benefits are not allowed / paid at a time to a student. The educational benefit (either stipend or re-imburement of fee) once opted to FEB & GIF for a student shall not be changed during the whole prescribed tenure/period of studies / degree programme.

Attested photo copies on A-4 size paper of the following documents alongwith covering/forwarding letter of department are to be submitted with this application:

Documents about employee	Documents about Student
1. CNIC of employee and beneficiary	1. For degree programmes, copies of annual / semester result (for Islamic university course registration/permission form), (for COMSATS university progressive result) and transcript results verified by Vice Chancellor / Controller / Dy. Controller / Asstt. Controller (examination) / Registrar / Dy. Registrar / Asstt. Registrar or any authorized officer of the University / College / Institute.
2. In case of female employee, CNIC of her Husband. (Both sides of all CNIC's must be copied on A-4 size paper(s)).	2. For degree programmes, copies of transcript / detailed marks sheet verified by Vice Chancellor / Controller / Dy. Controller / Asstt. Controller (examination) / Registrar / Dy. Registrar / Asstt. Registrar or any authorized officer of the University / College / Institute.
3. Latest pay slip of employee attested by head of office / DDO showing complete detail of BF & GI deductions (02 copies).	3. University / college / Institution admission offer letter.
4. In case of deputationist, copy of deputation order / notification.	4. Copies of certificates of matriculation / intermediate shall be verified by the Principal / Vice Principal of concerned college / institute.
5. In case of retired employee, Pension Payment Order and Retirement Order / Notification.	5. CNIC or Form 'B' of the student. (Both sides of CNIC must be copied on A-4 size paper)
6. In case of retired employee last pay slip showing complete detail of BF & GI deductions duly verified by DDO.	6. Original Bank paid fee Challans for fee reimbursement pasted on A-4 size paper.
7. In case of deceased employee, a copy of Death Certificate.	7. In case of detail of fee is not given on fee challans, a certificate from the university Treasurer/AO/ college / institute regarding detail of fee (i.e. tuition fee, registration fee, sports fee, library fee, lab.fee etc).
8. In case of death of both the employee and his/her spouse, copies of their death certificates.	8. In case of online fee payment directly paid in the university account, fee challan showing detail of fee along with university verified copy of student ledger showing university A/C No. and detail of amount of fee deposited for the specific semester for which reimbursement is being applied and copy of bank manager's verified statement of a/c of the applicant showing transfer of semester fee into the university's a/c are required..
9. In case of deceased employee Benevolent fund card copy and pension payment order in favour of beneficiary.	9. HSSC/Bachelor degree annual result (before improvement / supplementary) duly attested.
10. List of family members.	10. In case of loss of original fee challan, phot copy of challan attested by Bank and University along with an affidavit by the employee.
11. Divorce Deed (in case of separation of female employee)	