AL-ALEEM MEDICAL COLLEGE, LAHORE Students Financial Support Committee Interview Performa for Financial Support Name of Applicant: ______ Father's Name: CNIC: _____ Hostilities: Day scholar: Hostel Name: _____ Room No: _____ Contact number: _____ E-mail: _____ Father's Address: Current: Permanent: Business: Job: Contact No: Income: Attach Evidence: (Salary certificate/ income tax returns for last two years) any other. Mother: Housewife: Job: **Mother's Address:** Current: Permanent: Business: Job: Contact No: Income:

Attach evidence: (Salary certificate/ income tax returns for last two years) any other.

Any other source of income:

Brothers & Sister 1. _____Age: _____ 2. Age: 3. Age: _____Age: _____ 4. 5. _____Age: _____ 6. _____Age: _____ Age: _____ 7. 8. _____Age: _____ _____Age: _____ 9. _____Age: ____ 10.

Student/ Job / Married: ______ Student/ Job / Married: _____ Student/ Job / Married: _____

Attach evidence:

- 1. If students attach school certificate with fee certificate / challan
- 2. If doing job attach salary statements

Mode of Payment of Fee at Al-Aleem Medical College, Lahore	
1 st year MBBS:	Amount:
2 nd year MBBS:	Amount:
3 rd year MBBS:	Amount:
4 th year MBBS:	Amount:
Final Year MBBS:	Amount:
Academic progress: (attach copies UHS subject wise result)	
1 ST Professional Part- I: 2 nd Professional Part- II: 3 rd Professional Part- III: 4 th Professional Part- IV: 5 th Professional Part- V:	
Applied for Bank Loan/ any other Source if scholarship or stipend (with evidential documents)Yes:Parents House=Rented:Own: Size	No:
Land (If any) Agriculture: <u>Attach photocopies of</u>	How much:
 Income Tax return of parents / guardian for the last two years Copies of electricity bills last Three Months Bank Account Statements (1 year) Salary Slips last three Months Any other scholarship 	