



# RIPHAH INTERNATIONAL UNIVERSITY

## Scholarship Form for Beneficiaries referred by Regional Organization for Supporting Education, Chitral - (ROSE)

Form No. \_\_\_\_\_

### Basic Information:

Student Name:		Registration/CMS No:	
Father Name:		Program:	
Session/Batch: (in which admitted in Riphah)		Semester's name and number: (for which scholarship applied)	(1 <sup>st</sup> to 10 <sup>th</sup> )

### Student's Performance:

Stage	Marks/CGPA	Stage	Marks/GPA
Previous Degree		6th Semester	
1st Semester		7th Semester	
2nd Semester		8th Semester	
3rd Semester		9th Semester	
4th Semester		10 <sup>th</sup> Semester	
5th Semester			

### Declaration:

I hereby solemnly declare that information given above is correct to the best of my knowledge. I also undertake that Riphah can take any action against me for providing false information.

Signature of Student
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Signature of Father/Sponsor
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<p><b><u>HOD's Recommendation:</u></b> I have interviewed the student. Above mentioned particulars are correct. Student is eligible for <b>ROSE Scholarship Scheme.</b></p> <p>Signature (HOD)</p>
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<p><b><u>DEAN's Remarks:</u></b></p> <p>Signature (DEAN)</p>
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**Fee & Dues Department**

**Detail of Dues**

Last semester's balance	
Dues for current semester	
<b>Total Dues</b>	
Amount Deposited	
<b>Outstanding Balance</b>	

<b>Semester</b>	<b>%age</b>	<b>Amount</b>
1 <sup>st</sup>		
2 <sup>nd</sup>		
3 <sup>rd</sup>		
4 <sup>th</sup>		
5 <sup>th</sup>		
6 <sup>th</sup>		
7 <sup>th</sup>		
8 <sup>th</sup>		
9 <sup>th</sup>		
10 <sup>th</sup>		

**Breakup of Waiver:**

First Semester	80%
3.2 and above CGPA	80%
2.5 and above CGPA	60%
2.2 and above CGPA	40%
Below 2.2 CGPA	0

**Recommendations by Finance Department:**

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**Registrar's Remarks:**

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**Decision of Approving Authority:**

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**Signature of Approving Authority with Date: \_\_\_\_\_**