



Application/Registration form ONLY FOR BOYS

Reg. No _____

SCHOLARSHIP PROGRAMME FOR GILGIT BALTISTAN SESSION 2024-2025

DR. A. Q. KHAN SCHOOL SYSTEM & COLLEGE

IBRAHEEM CAMPUS ISLAMABAD

ADMISSION TEST FOR SCHOLARSHIP

PASTE YOUR 1
RECENT PHOTO
HAVING BLUE
BACKGROUND

01. Bank Online Deposit of Rs: 1000/- from Designated Bank Branches.

Bank Code		Deposit Date	
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*Note: Application Form will not be entertained without Original Deposit Slip (COLLEGE Copy)

02. Admission for Class : Tick Only One Box. (Mandatory)

6th 7th 8th 9th

03. Desired Test City:

GILGIT NIGAR SHIGAR HUNZA GHIZAR ASTORE DIAMER SKARDU

Personal Information: Use CAPITAL letters and leave spaces between words.

04. Candidate's Name: 05. Father's Name:

06. District of Domicile: (Student or Father) _____

07. CNIC of Father/Guardian #: 08. Date of Birth:

D	D	M	M	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 Total Age:

D	D	M	M	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

09. Religion: _____ Father's/Guardian's Occupation: _____

10. Postal Address: _____

City: _____ District: _____

11. Mobile: _____ 12. Parents Mobile No: _____

DO NOT give your portable mobile number (which is converted from one network to another) so that SMS delivery is ensured.

13. Are You Orphan? Yes No 14. Are You a Disabled Person? Yes No

Academic Background

Current School Category: PRIVATE GOVERNMENT

Class In Which Studying: _____

School Name: _____

Address: _____

Undertaking by the Applicant:

I _____ Son of _____ do here by solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the Entry Test, and I have filled-up the application form as per instructions given below. In case of any information contained herein is found at any stage to be missing, untrue, false, my candidature can be cancelled at any stage (even after admission, if so revealed later), and I shall be liable to legal action.

Date _____ Candidate's Signature _____



18. Undertaking by Parents/Guardian:

I _____ FATHER/GUARDIAN of _____ do here by give my consent for my child to take admission and study in Dr. A. Q. Khan College Ibraheem Campus Islamabad. Furthermore, I shall be responsible for his character , financial liabilities and that he will follow all rules and regulations of the institution.

Date _____ Parents Signature _____

GENERAL INSTRUCTIONS:

- Please fill the application form properly with complete and correct information/ answers.
- Please do not leave any field blank, otherwise your application may not be considered.
- Incorrect or false information may result in cancellation of your candidature at any stage, even after admission, and also proceeding of a legal action.
- **Attach your Two recent passport size Photographs, copy of Father's CNIC, bank deposit slip (College Copy).**
- **No need for any other documents e.g. School leaving , Domicile etc, till test / interview clearance.**
- Application Fee (Service Charges) is non-refundable/non-transferable to other category.
- Mobile phones or any electronic gadgets are not allowed in test center premises.
- **For Test Syllabus Guideline visit www.aqkicampus.com**
- Information about Roll No Slip/Test date/Test Center will be provided by SMS, Website, Email, Face book

نوٹ: درخواست دینے والے طلباء/سکولز ایک سے زائد فارمز بھی ایک ڈاک میں بھیج سکتے ہیں

LAST DATE TO APPLY FOR ADMISSION ENTRY TEST IS 1st March 2024

درخواست دینے کی آخری تاریخ 1 مارچ 2024 ہے

Office Call Timing: From 9:00 am to 5:00 pm

Website: www.aqkicampus.com

Help line

Dr. A. Q. Khan School System & College
Ibraheem Campus
For any Information Please Contact on:
Phone : 051-5970895-96
Mobile : 0301-4993419

SEND YOUR FORM

Dr. A. Q. Khan School System
and College Ibraheem Campus
Korang Town Extension Near
PwD Housing Society Islamabad



DR. A. Q. KHAN SCHOOL SYSTEM & COLLEGE

IBRAHEEM CAMPUS ISLAMABAD





SCHOLARSHIP PROGRAMME GILGIT BALTISTAN

BANK'S COPY

Branch Code: _____ Branch Name: _____ Date: _____

ONLINE DEPOSIT SLIP

(*Please deposit fee in only one bank & tick the relevant bank)

 National Bank of Pakistan	<input type="checkbox"/>	 HABIB BANK	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM		A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM		A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM		A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 21654037712982		Acc No. 23287106371203		Acc No. 0749222880051		Acc No. 03351004815140	

*Note: Desired Bank Stamp is required on the Deposit Slip & Original Deposit Slip (College Copy) along Application Form. Application Form will not be entertained without Original Deposit Slip (COLLEGE Copy)

Project ID: (AQKSP/09/2024)	
Applicant's Name:	Father Name:
Depositor CNIC No/	
Total Fee: Rs.1000/-	Amount in word: Rupees One Thousand Only <input type="checkbox"/>

Applicant's Signature _____

Cashier _____

Officer _____



DR. A. Q. KHAN SCHOOL SYSTEM & COLLEGE

IBRAHEEM CAMPUS ISLAMABAD





SCHOLARSHIP PROGRAMME GILGIT BALTISTAN

STUDENT COPY

Branch Code: _____ Branch Name: _____ Date: _____

ONLINE DEPOSIT SLIP

(*Please deposit fee in only one bank & tick the relevant bank)

 National Bank of Pakistan	<input type="checkbox"/>	 HABIB BANK	<input type="checkbox"/>	 UBL	<input type="checkbox"/>		<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM		A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM		A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM		A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
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