



Application/Registration form **ONLY FOR BOYS**

Reg. No _____

SCHOLARSHIP PROGRAMME
SESSION 2025-26

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	
-----------	--	--------------	--

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

02. Class (Studying Now): _____

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

Pre-Medical

Pre-Engineering

ICS

F.A (IT)

04. TEST WILL BE CONDUCTED ONLINE. MENTION YOUR WHATSAPP NO BELOW.

WHATSAPP NO: _____

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

05. Candidate's Name:

06. Father's Name:

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

08. CNIC of Father/Guardian #:

09. Date of Birth:

10. Religion: _____ **Father's/Guardian's Occupation:** _____

11. Postal Address: _____

_____ **City:** _____ **District:** _____

12. Mobile: _____ **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

Select Your Desired test Syllabus.

For Test Guideline Visit www.aqkicampus.com

TEXT BOOK BOARD)

Academic Background

Current School Category: **PRIVATE**

GOVERNMENT

SEF SUPPORTED
Sindh Education Foundation

Class In Which Studying: _____

School Name: _____

Marks Class 9th: **Percentage** **Grade** **Board**

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.
- **Minimum 60% Marks in 9th/10 are Required to Apply for Scholarship**
- **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 طلباء کے ایڈمیشن فارم ایک ہی لفافے میں ڈاک کے ذریعے بھیج سکتے ہیں

LAST DATE TO APPLY FOR ADMISSION ENTRY TEST IS 30 June 2025

درخواست دینے کی آخری تاریخ 30 جون 2025 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 / 051-5970896
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


BANK'S COPY

Branch Code: _____ Branch Name: _____ Date: _____


ONLINE DEPOSIT SLIP

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

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 21654037712982	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 06271330548001	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 0749222880051	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
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/10/2025)	
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


STUDENT COPY


Branch Code: _____ Branch Name: _____ Date: _____


ONLINE DEPOSIT SLIP

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

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 21654037712982	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 06271330548001	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 0749222880051	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
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/10/2025)	
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


COLLEGE COPY


Branch Code: _____ Branch Name: _____ Date: _____


ONLINE DEPOSIT SLIP

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

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 21654037712982	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 06271330548001	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
Acc No. 0749222880051	

	<input type="checkbox"/>
A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM	
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/10/2025)	
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