sowEH Scholarships Application Form SEEDS

(Support Education for Empowerment and Development of the Society)

INSTRUCTIONS FOR APPLICANTS

1. *Please complete the application form accurately using a blue or black pen.*
2. *Staff members of institutions are requested to verify students' academic details and assist them during form filling process to ensure accuracy and transparency.*

SECTION I: PERSONAL INFORMATION

Student Name: _____ Father Name: _____

Gender: _____ Date of Birth: _____

Home Address: _____ Email / Phone: _____

SECTION II: ACADEMIC DETAILS

Institute Name: _____ Current Class: _____

Subject / Field: _____ Latest Result: _____

SECTION III: SCHOLARSHIP DETAILS

Please list maximum of two scholarships in order of priority for consideration.

Priority	Name of the Scholarship
Priority 1	
Priority 2	

☐ ***I want to be considered for WiSE Program (Only for Women in STEM).***
(Please tick the box, if you agree)

SECTION IV: CERTIFICATES, AWARDS, AND SCHOLARSHIPS ETC

(List only achievements or certificates you can verify, documents will be required if selected)

S. No	Award, Achievement, Certificate etc. Name	Date
1.		
2.		
3.		
4.		
5.		

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SECTION V: NEED BASE JUSTIFICATION

*(Please provide **accurate monthly income details** as per official documents (e.g., salary slip). If your parent or guardian's income is from labor or an unregistered business, you may enter an approximate)*

Family Income: _____   Monthly Expenses: _____

Total Members: _____   Any Medical Charges: _____

SECTION VI: DECLARATION OF INFORMATION

I declare that the information provided above is true and complete to the best of my knowledge. I understand that any false or misleading information may lead to disqualification and a two-year ban to apply for future scholarships.

☐ ***If selected, I give my consent to share my story on sowEH platforms.***
   (Please tick the box, if you agree)

_____
Applicant's Signature

SECTION VII: RECOMMENDATION BY FACULTY MEMEBR

Candidates are responsible for ensuring that a faculty member completes this section. The student should fill out the information below, while the faculty member can scan the QR code on the right or visit https://forms.gle/ocnYPkReWqCdELoV6 to access and submit the confidential recommendation form.

*sowEH **SISP, STEM, and WiSE candidates are not required to complete this section**. However, they **must submit a reference letter and a personal statement** as outlined in the Information Booklet.*

Access Code: sowEH2026srf

Student Name: _____   Father Name: _____

Institute Name: _____   CNIC /B-Form: _____

☐ ***I confirm that, I have submitted google recommendation form for the above candidate.***
   (Please tick the box, if you agree)

Faculty Name & Designation: _____   (___Sign Here___)

Candidates are required to scan this form and email (as per format described in information booklet) on scholarships@soweh.org before the deadline.

Applications submitted without a recommendation will not be considered for scholarship.