

PAKISTAN ATOMIC ENERGY COMMISSION FOUNDATION
P.O BOX NO. 216, ISLAMABAD
HUMAN RESOURCE SKILL DEVELOPMENT
(Beneficiaries: Children of Employees in Pay-Scale 1 – 7)

1. Applicant's Name: Mr. / Mrs. _____ D/S/W of _____
(Block letters)
2. Employee's Name: Mr. /Mrs. _____ D/S/W of _____
(Block letters)
- 3(a). PIN: _____ 3(b) PPO # _____ 3(c) CNIC # _____ - _____ - _____
4. Designation: _____ 5. Pay-Scale: _____
- 6(a) Current / Last Establishment. _____ Date of Joining: _____
- 6(b) Previous Establishment. _____ Date of Joining: _____
7. Present Status In-service Retired
Date of retirement / Superannuation _____
- 8 (a) Nature of Service: Regular Contract
- 8(b) If on Contract then Duration of Contract: From _____ To: _____
9. Date of starting contribution towards CFP: _____
(Mention month & year e.g Mar, 01)
10. Child's / Ward's Name: _____
(Block letters)
- 11(a) Whether wholly dependant on the Applicant?
Yes No
- 11(b) Child's income from all sources: _____
12. Course Attended: _____ 12(b). Level of study: _____
(e.g. Diploma / Certificate etc.)
13. Course Duration. _____ 14. Trade / Speciality _____ 15. Date of Passing. _____
16. Name of the Institute / College: _____
17. Marks obtained in final examination / Trade Test. (if any) _____ Out of _____ (_____) %.
18. Purpose of taking the Course: For Employment For Personal Development Any Other (Please Describe)
19. Course Outcome: Employed Started own work Any Other (Please Describe)
20. Whether any other financial assistance availed from the Foundation earlier?
Yes No
If yes, Amount Rs. _____ Date: _____
21. **ATTESTATION BY THE INSTITUTE:**
Certified that Mr. /Ms. _____ S/o / D/o _____ has
studied in this institute in (Level) Diploma / Certificate in _____ (_____) (specify technology / trade)
from _____ 20____ to _____ -20____.
(Seal & Dated Signature of the Head of Institute / Department / Authorized officer)
22. **DECLARATION BY THE APPLICANT.**
I solemnly declare that I know/ read the terms & conditions of the subject scheme and that the above information
is true to the best of my knowledge and believe.
Date: _____ 20____
(Signature of the Applicant) (Applicant's Cell #)
23. **ENDORSEMENT FROM HEAD OF ESTABLISHMENT / ADMINISTRATOR (For in-service Employees).**
The above information as submitted by the applicant is correct & verified.
Date: _____
(Dated Signature & Stamp) (Contact #)

Documents/Eligibility Checklist

(Tick the relevant one)

- An attested copy of the official certificate issued by the Institute clearly showing the Course level, duration, trade / technology, date of completion and date of issue
- Attested copy of pages 1 & 2 of the service book of the employee showing list of his / her family members
- Certificate (in original) from the Head, LAO that the applicant) indicating month and year of making CFP contribution.
- Attested copy of the immediate previous month's pay slip of the applicant. In case of retired / deceased employee, copy of LPC (Last Pay Certificate).
- Attested copy of the CNIC of the applicant.

GENERAL TERMS & CONDITIONS

Stipend Rate:

Rs. 10,000/- (Rupees Ten Thousand only)

Terms & Conditions:

- i. Candidate should have completed any technical or vocational training course (excluding DAE) from an Institute accredited to a concerned authority like TEVTA, Punjab Board of Technical Education etc.
- ii. Course duration should be 4 to 12 months.
- iii. The candidates may be tested for their trade.
- iv. The Employee should apply within six (6) months of date of result announcement.
- v. The Employee should be regular contributor towards CFP Scheme for at-least 2 years.