



GOVERNMENT OF SINDH
ZAKAT & USHR DEPARTMENT

CERTIFICATE NO.: _____

DATE: _____

ISTEHQAQ CERTIFICATE

It is certified that Mr. / Mrs. / _____

S/o, D/o _____ holding CNIC No. _____

is a permanent residence of _____

(Address of beneficiary)

2. He / She is poor person and has no source of income to meet the expenditure on Higher Education.

3. His / Her Istehqaq for Need Cum- Merit Basis Scholarship is therefore endorsed.

Stamp/ Official seal of

Authorized Person

Signature: _____

Name of Authorized Person: _____

District Zakat & Ushr Committee: _____