



GOVERNMENT OF SINDH
ZAKAT & USHR DEPARTMENT

Certificate No. _____

Dated: _____

ISTEHQAQ CERTIFICATE

It is certificated that Mr. / Mrs. _____

S/o / D/o _____ holder of CNIC No. _____

is a permanent resident 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 & Usher Committee: _____
