

STATE BANK OF PAKISTAN EMPLOYEES WELFARE TRUST
APPLICATION FOR REIMBURSEMENT OF EDUCATIONAL EXPENSES TO
DEPENDENT CHILDREN OF MEMBERS EXPIRED DURING SERVICE

1. Name of Applicant: _____
2. Name of Deceased Member: _____
3. Relationship with Deceased Member _____
4. Index / PIN/ Membership Number _____ Date of Death: _____
5. Details of Students:-

Name of Student	Relationship with Deceased	Name and Address of Institution along with contact details	Date of Admission	Class	Session
1.					
2.					
3.					

6. Details of claims/documents attached:-

Particulars	Receipts No. & Date	Amount claimed (Rs.)	Amount entitled. (Rs.)
(a) Admission Fee.			
(b) Tuition Fee.			
(c) Examination Fee.			
(d) Registration/Enrolment Fee.			
(e) Computer Fee.			
(f) Books/ Stationery			
(g) Uniform			
(h) Others Charges, if any			
	Total: -		

I declare that the above particulars furnished by me are correct. I further undertake that in case of discontinuation of studies by above mentioned Person(s) or enjoying such benefits/ grants from any other Organization/ Institution, shall render myself liable to refund the amount so paid to me to EWT.

 (Name & signature of Applicant)

Date.....

Home Address:.....

.....

Tel: No.....

E-mail.....

1. Attested copy of CNIC or Form 'B'.
2. Original paid fee challan / receipt.
3. Original Letter from Educational Institution confirming enrollment of student.
4. Mark sheet/Result of previous examination/session.
5. Attested copy of Pension Book (all pages) (where applicable).