**AFFIDAVIT**

**[Applicant Name and CNIC]**

**[Applicant Address]**

**[City, Postal Code]**

**To Whom It May Concern:**

I, [**Applicant Name**], son/daughter of [**Father's Name**], CNIC Number ………………………resident of [**Applicant Address**], do hereby solemnly affirm and declare as follows:

1. I hereby declare that all the information provided in my application for the Honhaar Undergraduate Scholarship Program is true, accurate, and complete to the best of my knowledge and belief.
2. I confirm that my monthly family income does not exceed;
* PKR 350,000 (Pakistani Rupees Three Hundred and Fifty Thousand) for Public Sector HEIs **(Incase student is enrolled in Public sector Universities, HED Colleges and Medical & Dental Colleges).**
* PKR 500,000 (Pakistani Rupees Five Hundred Thousand) **(Incase student is enrolled in Federal / Private sector HEIs).**

I make this affidavit in good faith and understand that any false information or misrepresentation may lead to disqualification from the Honhaar Undergraduate Scholarship Program and legal action.

**Deponent**

**[Applicant Name]**

**[Signature of Deponent]**

**Witnessed by:**

**[Witness's Name]**

**[Witness's Address]**

**[Witness's CNIC Number]**

**[Signature of Witness]**

**[Date]** **[Place]**