

**Application/Registration form ONLY FOR BOYS**

Reg. No _____

**SCHOLARSHIP PROGRAMME FOR SINDH
SESSION 2026-27****DR. A.Q. KHAN SCHOOL SYSTEM & COLLEGE****IBRAHEEM CAMPUS ISLAMABAD****ADMISSION TEST FOR SCHOLARSHIP**PASTE YOUR 1
RECENT PHOTO
HAVING BLUE
BACKGROUND**01. Bank Online Deposit of Rs: 1000/- from Designated Bank Branches.**

Bank Code		Deposit Date	
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Note: Application Form will not be entertained without Original Deposit Slip (COLLEGE Copy)*02. Class (Studying Now):** _____**03. Select Class for Admission :** Tick Only One Box. (Mandatory)**6th** ☐**7th** ☐**8th** ☐**9th** ☐**04. Desired Test City:****SUKKUR** ☐**KHAIRPUR** ☐**GHOTKI** ☐**LARKANA** ☐**SHAHDAKOT** ☐**SHIKARPUR** ☐**NAWABSHAH** ☐**NAUSHERO
FEROZ** ☐**MIRPUR
KHAS** ☐**UMERKOT** ☐**MITHI** ☐**HYDERABAD** ☐**Personal Information:** Use CAPITAL letters and leave spaces between words.**05. Candidate's Name:** **06. Father's Name:** **07. District of Domicile:** (Student or Father) **08. CNIC of Father/Guardian #:** **09. Date of Birth:** **10. Religion:** **Father's/Guardian's Occupation:** **11. Postal Address:** **City:** **District:** **12. Mobile:** **Parents Mobile No:** DO NOT give your portable mobile number (which is converted from one network to another) so that SMS delivery is ensured.**13. Are You Orphan?** Yes ☐ No ☐**14. Are You a Disabled Person?** Yes ☐ No ☐**Select Your Desired test Syllabus.**
For Test Guideline Visit www.aqkicampus.com**OXFORD (OUP)** ☐**STBB (SINDH TEXT BOOK BOARD)** ☐**Academic Background****Current School Category:** **PRIVATE** ☐**GOVERNMENT** ☐**SEF SUPPORTED** ☐
Sindh Education Foundation**Class In Which Studying:** **School Name:** **Address:**

Undertaking by the Applicant:

I _____ Son of _____ do here by solemnly declare and affirm that I have read and understood the instructions and conditions for appearing in the Entry Test, and I have filled-up the application form as per instructions given below. In case of any information contained herein is found at any stage to be missing, untrue, false, my candidature can be cancelled at any stage (even after admission, if so revealed later), and I shall be liable to legal action.

Date _____ Candidate's Signature _____

Picture 2

Paste your recent
passport size color
photograph not older than
6 Months having
blue background with Stapler

تصویر لازماً منسلک کریں بصورت
دیگر فارم عمل میں نہیں لایا جائیگا۔

18. Undertaking by Parents/Guardian:

I _____ FATHER/GUARDIAN of _____ do here by give my consent for my child to take admission and study in Dr. A. Q. Khan College Ibraheem Campus Islamabad. Furthermore, I shall be responsible for his character , financial liabilities and that he will follow all rules and regulations of the institution.

Date _____ Parents Signature _____

GENERAL INSTRUCTIONS:

- Please fill the application form properly with complete and correct information/ answers.
- Please do not leave any field blank, otherwise your application may not be considered.
- Incorrect or false information may result in cancellation of your candidature at any stage, even after admission, and also proceeding of a legal action.
- **Attach your Two recent passport size Photographs, copy of Father's CNIC, bank deposit slip (College Copy).**
- **No need for any other documents e.g. School leaving , Domicile etc, till test / interview clearance.**
- Application Fee (Service Charges) is non-refundable/non-transferable to other category.
- Mobile phones or any electronic gadgets are not allowed in test center premises.
- **For Test Syllabus Guideline visit www.aqkicampus.com**
- Information about Roll No Slip/Test date/Test Center will be provided by SMS, Website, Email, Face book

نوٹ: درخواست دینے والے طلباء / سکولز ایک سے زائد طلباء کے ایڈمیشن فارم ایک ہی لفافے میں ڈاک کے ذریعے بھیج سکتے ہیں

LAST DATE TO APPLY FOR ADMISSION ENTRY TEST IS 15th January 2026

درخواست دینے کی آخری تاریخ 15 جنوری 2026 ہے

Office Call Timing: From 9:00 am to 5:00 pm

Website: www.aqkicampus.com

Help line

Dr. A. Q. Khan School System & College
Ibraheem Campus
For any Information Please Contact on:
Phone : 051-5970895 / 051-5970896
Mobile : 0301-4993419

SEND YOUR FORM

Dr. A. Q. Khan School System
and College Ibraheem Campus
Korang Town Extension Near
PwD Housing Society Islamabad



DR. A. Q. KHAN SCHOOL SYSTEM & COLLEGE

IBRAHEEM CAMPUS ISLAMABAD SCHOLARSHIP PROGRAMME SINDH

BANK'S COPY

BRANCH CODE: _____ BRANCH NAME: _____ DATE: _____

ONLINE DEPOSIT SLIP

(*Please deposit fee in only one bank & tick the relevant bank)

 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 21654037712982	 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 0749222880051	 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 03351004815140
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*Note: Desired Bank Stamp is required on the Deposit Slip & Original Deposit Slip (College Copy) along Application Form.
Application Form will not be entertained without Original Deposit Slip (COLLEGE Copy)

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A/C Title : Sabeel Ahmed

A/C Number : 03320575344

Transaction Details

Transaction ID: _____

Date: _____ Time: _____

نوٹ: جاز کیش اور ایزی پیسہ میں فیس جمع کروانے کی صورت میں ٹرانزیکشن ID اور تاریخ لازمی پر کریں۔ اصل رسید لگانے کی ضرورت نہیں ہے۔

Project ID: (AQKSP/11/2026)

Applicant's Name:	Father Name:
Depositor CNIC No/	
Total Fee: Rs. 1000/-	Amount in word: One Thousand Only <input type="checkbox"/>

Applicant's Signature

Cashier

Officer



DR. A. Q. KHAN SCHOOL SYSTEM & COLLEGE




IBRAHEEM CAMPUS ISLAMABAD
SCHOLARSHIP PROGRAMME SINDH

STUDENT COPY

Branch Code: _____ Branch Name: _____ Date: _____

ONLINE DEPOSIT SLIP

(*Please deposit fee in only one bank & tick the relevant bank)

 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 21654037712982	 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 0749222880051	 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 03351004815140
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 	A/C Title : Sabeel Ahmed A/C Number : 03320575344
Transaction Details	
Transaction ID: _____	
Date: _____	
Time: _____	

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Father Name:	
Depositor CNIC No/	
Total Fee: Rs. 1000/-	
Amount in word: One Thousand Only	<input type="checkbox"/>

Applicant's Signature

Cashier

Officer



DR. A. Q. KHAN SCHOOL SYSTEM & COLLEGE




IBRAHEEM CAMPUS ISLAMABAD
SCHOLARSHIP PROGRAMME SINDH



COLLEGE COPY

Branch Code: _____ Branch Name: _____ Date: _____

ONLINE DEPOSIT SLIP

(*Please deposit fee in only one bank & tick the relevant bank)

 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 21654037712982	 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 0749222880051	 A/C Title: DR. A. Q. KHAN SCHOOL SYSTEM Acc No. 03351004815140
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Amount in word: One Thousand Only	<input type="checkbox"/>

Applicant's Signature

Cashier

Officer