

Higher Education Commission Pakistan

Prime Minister's Electric Wheelchair Scheme for University Students (Phase-3)

INCLUSIVE DEVELOPMENT — LEAVING NO ONE BEHIND

Under Prime Minister's Electric Wheelchair Scheme, Higher Education **Commission invites applications from** the students having ambulatory disability and are enrolled/being enrolled with the Public Sector **Universities and Affiliated** 350+

Colleges during year 2021-22.



Eligibility Criteria

Electric Wheelchairs will be distributed among students who:

Have physical and permanent ambulatory disability to such a degree that they are unable to move from place to place without the aid of a wheelchair.

Wheelchairs

2 Phases

- Are not able to cross curbs because of paralysis or loss of function of legs.
- Have one or both legs missing.
- Are registered/being registered for academic session 2021-22 in HEC Recognized Public Sector Universities and Affiliated Colleges of all Provinces, AJ&K and Gilgit Baltistan in Undergraduate, Postgraduate, MS/ MPhil and PhD programmes.
- Have valid certificate of special person/ambulatory disability from the relevant Competent Authority/ Government Institutions.
- Have not received Electric Wheelchairs in Phase 1&2.

How to Apply

- Students who meet the eligibility criteria, are advised to fill and submit the online application form on eportal.hec.gov.pk/wheelchair by November 15, 2021.
- Take print of the application form, attach necessary documents and submit in the office of respective Vice Chancellor/ Registrar/Designated Person.
- Universities/ Affiliated Colleges will forward all eligible cases to HEC in one transaction by December 10, 2021 at the following address for distribution of Electric Wheelchairs on merit.

Project Director Higher Education Commission Sector H-8/1, Islamabad

051-90808160, 90808056 UAN: 111-119-432 Or 0334-1119432 sandleeb@hec.gov.pk www.hec.gov.pk



APPLICATION FORM

PRIME MINISTER'S ELECTRIC WHEELCAHIR SCHEME FOR UNIVERSITY STUDENTS – HIGHER EDUCATION COMMISSION

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Level MajorSubject Institute Start Date Date Marks Obtained/ Marks/ CGPA %

A-	PARTICULARS OF THE APPLICANT (IN CAPITAL LETTERS)	
1.	Name of Applicant:	
2.	Father's Name:	
3.	CNIC:	
4.	Permanent Address:	
5.	Email:	
6.	Mobile:	
7.	Domicile District& City:	
8.	Marital Status:	
9.	Gender:	
10.	Date of Birth:	
11.	Age (on submission date):	
12.	Current Weight (in Kg):	
13.	Nationality:	8 .00
14.	University/Affiliated College Name:	
15.	Study Program Enrolled for (Bachelor/Master/M.Phil/PhD):	
16.	Session(starting and ending year) of Degree Enrolled:	
17.	Student Registration Number (given by the University):	ed)

HigherSecondarySchool Certificate //Intermediate/A-level Bachelor's Degree Master'sDegree Ms/M.Phil./PhD Do you have a significant Ambulatory Disability requiring Electric Wheelchair for movement? Do you have a Valid Certificate of special ambulatory need (for Electric Wheelchair) from the relevant Government institution? C- DOCUMENTS REQUIRED (by the Student) i. Valid Certificate of special ambulatory need (for Electric Wheelchair) from the relevant Government institution D- DISCLAIMER/UNDERTAKING (By Applicant) i. It is solemnly affirmed that all the particulars, provided by me are correct to the best of my knowledge. In case of any misrepresentation as identified by HEC / other agency at any stage, my application will be terminated immediately. Consequently ("Ib eliable to return the Electric Wheelchair and associated items / refund full cost of wheelchair with penalty. Date: Signature: E- DOCUMENT REQUIRED (By the University: Compulsory in hard form) i. Verification and Signature of the University's Authorized Medical Officer ii. Verified document by the University's Three Members Committee ATTACHED	SecondarySchoolCertificate /Matriculation/ O-level		*.					
Master'sDegree MS/M.Phil./PhD Do you have a significant Ambulatory Disability requiring Electric Wheelchair for movement? Do you have a Valid Certificate of special ambulatory need (for Electric Wheelchair) from the relevant Government institution? C- DOCUMENTS REQUIRED (by the Student) i. Valid Certificate of special ambulatory need (for Electric Wheelchair) from the relevant Government institution D- DISCLAIMER/UNDERTAKING (By Applicant) i. It is solemnly affirmed that all the particulars, provided by me are correct to the best of my knowledge. In case of any misrepresentation as identified by HEC / other agency at any stage, my application will be terminated immediately. Consequently I'll be liable to return the Electric Wheelchair and associated items / refund full cost of wheelchair with penalty. Date: Bocument RequireD (By the University: Compulsory in hard form) i. Verification and Signature of the University's Authorized Medical Officer ii. Verified document by the University's Three Members Committee ATTACHED	Certificate							
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