

# APPLICATION FORM FOR SCHOOL/ COLLEGE AFFILIATION

-	te Name of the School/ College:
(as per Sc	chool Registration Certificate issued from Education and Literacy Department)
	lease ensure you write the correct name of the school, as it will be reflected on all official documents for school and the candidates.
	alf of the aforementioned school/ college, we request for the affiliation with Aga Khan University ation Board (AKU-EB) to offer Secondary and/or Higher Secondary School Certificate.
	erstand that following the submission of this form, AKU-EB will schedule an inspection visit to the school naking a final decision on the affiliation process.
We confi	irm that:
a. We	have read the following documents available on the AKU-EB's website or sent to us via email:
	Subject Specific Syllabus Documents  Disciplinary Procedures and Code of Conduct for Candidates sitting for the AKU-EB administered examinations  Affiliation Policies and Procedures for Affiliation
b. The	

School's Details:	
Year of Establishment:	Official School Registration Number:
Type of School:	
☐ Boys ☐ Girls	☐ Co-Educational
Academic Year (indicate month only):	
Starts:	Ends:
Age Range of Students across the School (in years only) From:	To:
No. 12 Co. 12	
Medium of Instruction:	
☐ English ☐ Urdu	Both
Legal Status:	
☐ Private (All profit-making schools)	
☐ Not for Profit (Schools that do not generate profit s Charities, etc.)	uch as NGO's, Trusts, Community Organizations,
School Contact Information:	
School's Address:	
City:	District:
,	
School's Contact #:	School's Official Email ID:
School's Public Website:	
Landaushin Contact Information	
Leadership Contact Information:	Calcalla Oromas Cantact Ha
Name of School's Owner:	School's Owner Contact #:
Name of School's Head:	Position or Job Title of School's Head:
INAING OF SCHOOL 8 FIEAU.	rosition of Job Title of School's Head;
Head of the School's Contact #:	Head of the School's Email ID:
1244 of the Selloof & College II.	Tiene of the Senson & Linear 15.
Examination Officer's Name:	Examination Officer's Email ID:
Examination Officer's Contact Number:	

	Number of Students	Academic level	Number of Students
Kindergarten		SSC	
Primary		HSSC	
Middle School			
eaching Staff and Qualifica	tions:		
	Qualifications		Number of Teachers
Undergraduate			
Graduate Level			
Postgraduate			
Degree in Education			
Professional Qualifications			
Ceaching Time:			
Number of Weeks of Instru	ction in the Academic Year		
Number of Instructional Per	riods Students Receive Week	dy	
Duration of each Instruction	nal Period (in minutes)		
Maximum Number of Stude	ents in a Class		
Facilities Available at School	: (Check all that apply)		
□ Library	☐ Computer La	boratory	☐ Internet Connectivity
			☐ Examination Hall
☐ Science Laboratorie	S ☐ Staff Room		
		orm	
	ime of Submission of this Fo		
Monthly Tuition Fee at the T	ime of Submission of this Fo	orm <b>Monthly T</b>	
Monthly Tuition Fee at the T	ime of Submission of this Fo		
Monthly Tuition Fee at the T  Grade  IX	ime of Submission of this Fo		
Monthly Tuition Fee at the T  Grade  IX  X	ime of Submission of this Fo		
Monthly Tuition Fee at the T  Grade  IX  X  XI	ime of Submission of this Fo		
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Monthly Tuition Fee at the T  Grade  IX  X  XI  XII  Qualification(s) Offered by	ime of Submission of this Fo	Monthly T	
Monthly Tuition Fee at the T  Grade  IX  X  XI  XII  Qualification(s) Offered by	the School:	Monthly T	uition Fee
Monthly Tuition Fee at the T  Grade  IX  X  XI  XII  Qualification(s) Offered by  Which qualification/s would	the School:	Monthly T	uition Fee
Monthly Tuition Fee at the T  Grade  IX  X  XI  XII  Qualification(s) Offered by  Which qualification/s would  □ Secondary School Certification	the School:  you like to register for? (Checket (SSC)  Higher School currents attions does the school currents atting the school current atting the school currents atting the school currents atting the school currents atting the school currents atting the school c	Monthly T  eck both if apply)  Secondary School Certificantly offer or plan to offer	uition Fee

**School Overview:** 

Total Number of Students in different Sections:

How will the school enco	ourage students to opt for AKU	J-EB's Secondary/Higher Secondary	ndary School Examinations?	
Is your institution current	tly affiliated with any exam bo	ard for SSC or HSSC? (If yes,	specify)	
In which year do you exp	pect to enter candidates for their	r first examination?		
SSC Examinations:				
	1'-4 of annual office 11 of AVI	LED at CCC level, (Cl., L.L., e)	1.6	
Select from the following	g list of groups offered by AKU	J-EB at SSC level: (Check both	n if apply)	
	☐ Science	☐ Humanities		
Number of expected enro	olments of grade IX (SSC-I) for	r the next 3 years for AKU-EB	examinations:	
_	-	·		
Group	Expected Enrolment in SSC-I			
31 <b>0p</b>	Current Year	Year 2	Year 3	
Science				
Humanities				
HSSC Examinations:				
Select from the following	g list of groups offered by AKU	J-EB at HSSC level: (Check al	ll that apply)	
☐ Science (Pre-Medic	al)	-Engineering) $\square$ So	cience (Science General)	
☐ Commerce	☐ Humanities	<i>C C</i> ,	,	
Number of expected enro	olments of grade XI (HSSC-I)	for the next 3 years for AKU-E	B Examinations:	
	F	Expected Enrolment in HSSC	-I	
Group	Current Year	Year 2	Year 3	
Pre-Medical	Current rear	Tcai 2	Teal 5	
Pre-Engineering				
Science General				
	•			
Commerce				

### **Terms and Conditions for Conducting Examinations**

Please carefully read the following terms and conditions for conducting examinations under affiliation. By proceeding, you agree to the terms outlined below:

- ☐ The same school will act as the exclusive exam center for both SSC and HSSC, ensuring consistency.
- Additional space will be made available for private candidates, with the school authorities providing basic resources.
- ☐ Teachers from affiliated schools may apply to be examiners but are prohibited from examining the same class or subjects they teach.
- ☐ ECD teachers may apply for examiner/invigilator by submitting the required form.
- ☐ Housekeeping staff assigned to exam duties will be compensated according to AKU-EB's per-shift rates.

## **Submission of Form:**

Once you have completed the Affiliation form, please enclose the following items and send it to the mailing address provided below:

- A copy of the valid School Registration Certificate
  (issued by Government of Education and Literacy Department & College Education Department)
- ▶ School Inspection Fee:

1) SSC PKR 73,000 2) HSSC PKR 85,000 3) SSC and HSSC both PKR 95,000

<u>Note</u>: Each school seeking affiliation must submit a complete application form along with the school inspection fee. The inspection is the initial step toward obtaining affiliation with AKU-EB, and the inspection fee is a one-time charge.

After the inspection is completed, the school will be required to pay the affiliation fee as outlined in the affiliation letter from AKU-EB.

Please note that affiliation is renewed annually, and schools must pay the affiliation fee each year according to the fee structure.

# Mode of Payments:

Inspection Fee can be submitted in the following mode of payment:

#### 1. Pay Order:

**Beneficiary Name:** The Aga Khan University

**NTN** #: 1206240-5

<u>Important note:</u> Pay order must be in favour of "<u>The Aga Khan University</u>", else your application will not be processed.

#### 2. Cash deposit at any HBL branch:

School can deposit amount in (PKR only) at any of the branch of Habib Bank Limited (HBL) and submit original deposit slip to AKU-EB along with form.

**Account Title** The Aga Khan University

**Account** # 0896-79006003-01

Branch Code 0896

Bank NameHabib Bank LimitedBranch NameKARSAZ, Karachi

**NTN** #: 1206240-5

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<ul><li> School should mention their sch</li><li> The acknowledgement of payme.</li></ul>	nt given by the bank on th	_	riginal) must be sent to AKU-
EB office along with application	form and documents.		
Pay Order/ HBL Deposit #:	Dated:		Amount:
iling Address:			
ompleted form along with original Pay ( e following address.	Order/ HBL's Original De	eposit Slip along	with documents to be sent to
-	oord		
ne Aga Khan University Examination Book - C, IED-PDC, 1-5/ B-VII	oard		
ederal B. Area, Karimabad arachi-75950, Pakistan			
el: +92 21 3682 7011-8			
mail: examination.board@aku.edu			
claration:			
s form and confirm that all the details p	have 1 rovided by me are truthfu	ead and underst il and accurate.	ood the information set out in
ead of the School's Signature:		Date:	
<u> </u>			