



**UNITED MALACCA BERHAD** (1319-V)

**UNITED MALACCA UNIVERSITY SCHOLARSHIP SCHEME  
APPLICATION FORM**

**Application Procedure:**

1. Please type or write clearly.
2. If parent/parents are retired, state within brackets their occupation, name and address of employer/own business before retirement. If deceased, kindly submit death certificate.
3. Attach true copies of admission letter, academic transcripts/results, birth certificate and other relevant documents such as income tax notice of assessment of parents/guardians must be attached.
4. Completed application forms should be returned by **24<sup>th</sup> May 2019** to: -

**United Malacca Berhad**  
6th Floor, No. 61, Jalan Melaka Raya 8,  
Taman Melaka Raya, 75000 Melaka.

Please attach  
recent  
photograph here

**Name of University**

**Course of Study Offered by above University**

Duration of course	Commencement of course (mm/yyyy)	Completion of course (mm/yyyy)

**FINANCIAL ASSISTANCE**

Year received	Loan or scholarship	Name of organization/ other sources	Amount per annum

**SECTION A: PARTICULARS OF APPLICANT**

**Full Name (as in IC)**

**Home address (Permanent)**  
.....  
.....  
**City/Town** ..... **State** ..... **Postcode** .....  
**House Tel** ..... **Handphone no** .....  
**Email Address** .....

<b>Nationality</b>	<input type="text"/>	<b>Race</b>	<input type="text"/>	<b>Date of Birth</b>	<input type="text"/>
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<b>Sex</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Identity Card (New):</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<b>Marital Status</b>	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others
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**SECTION B: ACADEMIC RECORD****SPM / "O" Level or Equivalent Examination Results**

<b>Name of Examination</b>			
<b>School Name</b>			
<b>Year commenced</b>		<b>Year completed</b>	
<b>No</b>	<b>Subjects</b>	<b>Grade</b>	

**STPM / "A" Level / Matriculation or Equivalent Examination Results**

<b>Name of Examination</b>			
<b>School Name</b>			
<b>Year commenced</b>		<b>Year completed</b>	
<b>No</b>	<b>Subjects</b>	<b>Grade</b>	

**SECTION C: OTHER QUALIFICATIONS / AWARDS**

<b>Year</b>	<b>Name of Examination / Award</b>	<b>Grade / Award</b>

**SECTION D: LANGUAGE PROFICIENCY LEVEL (Please indicate POOR/FAIR/FLUENT)**

<b>Type of Language</b>	<b>Speak</b>	<b>Read</b>	<b>Write</b>
Bahasa Melayu			
English			
Mandarin			
Tamil			
Other:			

**SECTION E: EXTRA-CURRICULAR ACTIVITIES**

*(Activities in school / college / university and leadership positions held)*

Year	Club / Society / Organisation	Title / Responsibility

**SECTION F: WORK EXPERIENCE (if any)**

Period	Name of Employer	Designation

**SECTION G: REASON(S) FOR APPLYING**

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**SECTION H: FAMILY BACKGROUND**

<b>Father's name</b>				<b>Mother's name</b>			
<b>NRIC no</b>		<b>Age</b>		<b>NRIC no</b>		<b>Age</b>	
<b>Address</b>				<b>Address</b>			
<b>House Tel</b>				<b>House Tel</b>			
<b>H/p no.</b>				<b>H/p no.</b>			
<b>Occupation</b>				<b>Occupation</b>			
<b>Gross income per month</b>				<b>Gross income per month</b>			
<b>Name and address of employer / own business (if retired, state type of employment, name and address of previous employer / own business)</b>				<b>Name and address of employer / own business (if retired, state type of employment, name and address of previous employer / own business)</b>			
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**GUARDIAN (if applicable)**

Guardian's name		NRIC no		Age	
Address					
House Tel		H/p no.			
Occupation		Gross income per month			
Name and address of employer / own business (if retired, state type of employment, name and address of previous employer / own business)					
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.....					

**PARTICULARS OF ALL BROTHERS AND SISTERS (exclude applicant)**

Name	Relationship	Sex	Age	Marital status	Occupation (if studying, state level of education and name of school/institution)	Tel no (home, H/p or office)	Gross income per month

**SECTION I: REFEREES**

*Names of two (2) referees who are known to the applicant and applicant's family for a period of not less than 3 years. Referees can be relatives or close family friends BUT not applicant's own parents, brothers / sisters or fellow students. Referees should be contactable by telephone during office hours.*

Referees 1		Referees 2	
Name		Name	
Address		Address	
House Tel		House Tel	
H/p no.		H/p no.	
Occupation		Occupation	
No. of years known		No. of years known	
Relationship to applicant		Relationship to applicant	

**SECTION J: DECLARATION**

1. Have you ever had or been treated for serious illness affecting the Nervous, Respiratory, Genito-Urinary, Gastrointestinal, Metabolic, Haemopoietic and Lymphatic Systems, Cancer, AIDS, ETC.?

No  Yes (If YES, Please give details and dates)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Have you ever been convicted of a criminal offence?

No  Yes (If YES, Please state the charges)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Do you have any relatives working with United Malacca Berhad or its Group of companies?

No  Yes (If YES, please furnish the following information)

Name \_\_\_\_\_

Employer \_\_\_\_\_

Relationship \_\_\_\_\_

I hereby declare that the information and copies of documents provided by me in this Application Form are correct and true to the best of my knowledge. I fully understand and accept that, if it is found that a false declaration has been made on this form, the Company has the absolute right to disqualify my application.

Name: .....

I/C No.: .....

Signature: .....

Date: .....

**SECTION K: CHECK LIST TO BE COMPLETE BY APPLICANT**

Please Tick (√)

1.	Completed Application Form	
2.	Photocopy of applicant's IC / Birth Certificate	
3.	Photocopy of SPM / 'O' Level result	
4.	Photocopy of STPM / 'A' Level / Matriculation result transcript	
5.	Photocopy of University results	
6.	Letter of Offer from University	
7.	Document stating the course fee from the University	
8.	Testimonial / Awards / Academic Certificate / Extra-Curricular Docs	
9.	School Leaving Certificates	
10.	Photocopy of Guardian's Form B/BE/EA/EPF/Pension Statement etc	
11.	Sibling's pay-slip (if applicable)	

**FOR OFFICE USE**

**Date of Interview** .....

**Interview Assessment**  
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**Recommended for Scholarship**

Yes

No

**Interviewing Panel**

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Name:  
Designation:  
Date:

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Name:  
Designation:  
Date:

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Name:  
Designation:  
Date:

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Name:  
Designation:  
Date:

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Name:  
Designation:  
Date:

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Name:  
Designation:  
Date: