

#### Reg. No. 191001000010 (1319-V)

# **BURSARY PROGRAMME FOR EMPLOYEES' CHILDREN**

# **APPLICATION FORM**

#### **Application Procedure:**

- 1. Please type or write clearly.
- 2. If one parent is deceased, please 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 parent/guardian (if one is not employee of UMB Group).
- 4. Completed application form should be submitted by 10 August 2024 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 (Pe	rmanent)			
· - ·	Si	tate	Postcode	·····
Nationality		Race	Date of Birth	
Sex Male	Female	Identity Card (New):		
Marital Status	Single	Married	Others	

## SECTION B: ACADEMIC RECORD

## SPM / "O" Level or Equivalent Examination Results

	ne of Examination						
Sch	ool Name						
Yea	r commenced			Year of	completed		
No	Subject	S	Grade	No	Subj	ects	Grade
1				8			
2				9			
3				10			
4				11			
5				12			
6				13			
7				14			

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

Nam	ne of Examination			
Sch	ool Name			
Yea	r commenced		Year completed	
No		Subjects		Grade
1				
2				
3				
4				
5				

#### **SECTION C: OTHER QUALIFICATIONS / AWARDS**

Year	Name of Examination / Award	Grade / Award

# SECTION D: ADDITIONAL INFORMATION

You may add any other information, which you consider relevant to us in assessing your suitability for the bursary award.

## SECTION E: INFORMATION OF FAMILY

## PARTICULARS OF PARENTS

Father's name (as in IC):						
NRIC no	Age					
Address						
Occupation	Gross income per month					
Name and address of employer / own business (if one parent is not an employee of UMB Group of Companies in Malaysia)						

Mother's name (as in IC):					
NRIC no			Age		
Address					
Occupation		Gross income per m	nonth		
Name and address of employ	yer / own business (if one pare	nt is not an employee o	of UMB	Group of	
Companies in Malaysia)					

# 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 F: DECLARATION**

#### 1. Have you ever been convicted of a criminal offence?

No

Yes (If YES, Please state the charges)

I declare 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.

Signature	:
Name of Applicant	:
I/C No.	:
Date	:

## SECTION G: CHECK LIST TO BE COMPLETE BY APPLICANT

Please Tick ( $\sqrt{}$ )

1.	Completed Application Form	
2.	Photocopy of applicant's IC (Front & Back) / Birth Certificate	
3.	Photocopy of SPM / 'O' Level result	
4.	Photocopy of STPM / 'A' Level / Matriculation result transcript	
5.	Photocopy of University results, if applicable	
6.	Letter of Offer from University	
7.	Document stating the course fee and tuition fee from the University	
8.	Academic Certificate / Awards / Other qualification certificates	
9.	Photocopy of Parent's Form B/BE/EA/EPF/Pension Statement etc (if one parent is not employee of UMB Group of Companies)	

# SECTION H: VERIFICATION BY MANAGER (ESTATE/CENTRE)

Particulars are checked and found to be correct.

Signature of Manager	:		
Name of Manager	:		
Estate/Centre	:		
Date	:		Company's Chop
FOR OFFICE USE			
Status of application	Approved	Rejected	