

STUDENT APPLICATION FORM

No. 49 The Boulevard Mid Valley City Lingkaran Syed Putra Kuala Lumpur 59200 Malaysia

Tel: 03 22871000 Fax 03 27305050 Please affix your recent passport-sized photograph here

For Office Use	
Application ref. no.	:
Date received	:
Recruitment rep	:
Status of application	:
Date enrolled	:
Student ID No	:

A. PROGRAMIME APPLIED	
Please tick ($$) your preferred choice of programme in the boxes provided be	elow:
Undergraduate Programme	Postgraduate Programme
Foundation in Business Management (N/010/3/0414)	☐ Master of Business Administration (N/340/7/0634)
☐ Bachelor of Science (Hons) Maritime Business (N/345/6/0891)	Master of Science in Shipping Trade and Finance (N/840/7/0049)
Bachelor of Science (Honours) in Business Management (N/345/6/1077)	Master of Science in Wealth Management (N/343/7/0241)
☐ Bachelor of Science (Honours) in Finance (Investment Strategy) (N/343/6/0247)	
Intake session: March May October Others	Intake year: 20
B. DOCUMENTS CHECKLIST	
Please submit the following documents/ items along with the Student Applican be processed for admission. All documents must be certified and subm certified English translation must be attached.	, ,,
 Deposit slip of the application fee of MYR500 (non-refundable) in payable to HM International Sdn Bhd 	a bank draft, personal cheque, money order or postal order
Four (4) recent passport-size photograph	
One (1) certified copy of National Identification Card (IC)/ Passport	
One (1) certified copy of Birth Certificate	
One (1) certified copy of 'O' Level / 'A' Level, SPM / STPM / UEC of	or any other equivalent certificates / Diploma / Degree
One (1) certified copy of School Leaving Certificate	
One (1) certified copy of other relevant certificates (academic and o	curriculum)
 One (1) certified copy of National Identification Card (IC)/ Passport One (1) certified copy of Birth Certificate of parents or guardians One (1) certified copy of Salary Slip of parents or guardians (3mon 	
Affidavit letter (For difference in the names on personal documents).	
Two (2) referees' recommendation letter and evidence of funding	

C. PERSONAL INFORMATION
Full Name (as printed in Identity Card / Passport)
Date of Birth: Age: Place of Birth:
Race: Malay Chinese Indian Others (please specify)
Religion: Islam Buddhist Hindu Christian Others (please specify)
Nationality:
New Identity Card No.:
Old Identity Card No.:
Permanent Address:
Towns Cities
Town/ City: State: Country: Postcode:
osamy.
Correspondence Address (If different from Permanent Address):
Town/ City: State:
Country: Postcode:
E-mail Address:
Telephone No.: Mobile No.: Occupation: Gross Monthly Income: MYR/USD
Occupation: Gross Monthly Income: MYR/USD
Name of Employer (if any):
Address: Contact No.:
D. PARENTS INFORMATION
Father/ Guardian
Name of Father/Guardian:
Relationship: Nationality:
IC/ Passport No.:
Permanent Address:
Town/ City: State:
Country: Postcode: Makila Na .
Telephone No.: Mobile No.:
Occupation: Gross Monthly Income: MYR/USD

Mother/ Guardian		
Name of Mother/Guardian:		
Relationship:	Nationality:	
IC/ Passport No.:		
Permanent Address:		
Town/ City:	State:	
Country:	Postcode:	
Telephone No.:	Mobile No.:	
Occupation:	Gross Monthly Income: MYR/USD	
E. SPOUSE INFORMATION		
Name of Spouse:		
Nationality:		
IC/ Passport No.:		
Permanent Address:		
Town/ City:	State:	
Country:	Postcode:	
Telephone No.:	Mobile No.:	
Occupation:	Gross Monthly Income: MYR/USD	
F. EMPLOYMENT HISTORY		
Please tick $[\sqrt{\ }]$ in the relevant boxes, if your father	er/ mother/ guardian/ spouse is an employee of Halim Mazmin Group of Companies	s.
Father Mother Guardian	Spouse Not relevant	
Name of Employer :		
Address:		
Contact No.:		
G. SIBLINGS INFORMATION		
Name / Relationship (i.e. brother/sister)	Age Marital Status Occupation Monthly Gro	oss (USD)
i.		,
ii.		
iii.		
v.		
v. vi.		
vii.		
viii.		
ix.		

H. EDUCATION INFORMATION

List of schools attended and qualifications from the highest level (all applicants should enclose the official transcript of their qualification):

Name of School/ Institution		Date	Date of Attendance			
		Date Starte	d Date Awarded	Type of	Qualification	
i.						
ii.						
iii.						
iv.						
V.						
	(I) (OLL HODE					
Academic Qualification	n (I) - 'O' Level/SPM or ar	ly other equivale	ent			
Type of qualification:						
Date started:			I	Date ended:		
Name of Institution.						
Name of Institution:						
• • • •						
Subjec	ts Resi	ult/ Grade/Mark	Subjection	cts	Result/ Grade/Mark	
i.			vi.			
ii. :::			vii.			
iii.			viii.			
iv.			ix.			
V.			X.			
Name of Institution:						
		W 0 1 / 1 / 1			D 1/10 1 mm	
Subjec	ts Resi	ult/ Grade/Mark	Subjection	cts	Result/ Grade/Mark	
i. ii.			vi.			
iii.			viii.			
iv.			ix.			
V.			X.			
			I.		I	
Academic Qualification	ı (III) – Bachelor Degree	Others				
Type of qualification:						
Date started:			С	Date ended:		
Name of Institution:						
Total Cumulative Grad	e Point Average (CGPA):		Ove	erall Grade:		
Subject	s Resi	ult/ Grade/Mark	Subje	cts	Result/ Grade/Mark	
i.			vi.			
ii.			vii.			
iii.			viii.			
iv.			ix.			
V.			X.			

I. EXTRA-CURRICULAR ACTIVITIES (in school/institute)		
Type of Sport(s)	Level Represented*	Year
i.	•	
ii.		
iii.		
*School/Institute/District/State/National		
Type of Uniformed Body(s)	Level Represented*	Year
i.		
ii.		
*School/Institute/District/State/National		
Type of Club/ Society(s)	Level Represented*	Year
i.	20101 (10p) 0001(100	1001
ii.		
iii.		
*School/Institute/District/State/National		
Type of Award(s)/ Accolade(s) Received	Level Represented*	Year
i.		
ii. iii.		
*School/Institute/District/State/National		
J. ADDITIONAL INFORMATION		
Medical Disclosure		
Do you have any disability, impairment or long term medical c	conditions which may affect your studies:	res No
If you do, please specify or tick $\left[\sqrt{} \right]$ in the relevant boxes.		
Dyslexia Asthma Hearing imp	pairment Diabetes E	Epilepsy
AIDS/ HIV Tuberculosis Wheelchair user Blind/ partially blind/ colour blindness		
Require care support (please specify)	Others (please specify)	
Criminal Record		
Have you ever been convicted of a criminal offence?	es No	
If yes, (please specify)		
K. REFEREES INFORMATION		
Name of Referee:		
Occupation:		Years known:
Permanent Address:		
Town/ City:	State:	
Country:	Postcode:	

Mobile No.:

Telephone No.:

L. PERSONAL STATEMENT

In order to learn more about you, your aspirations and your personal and academic values, please assist us by giving us your views on the following:

1. Why do you want to join this programme? 2. What are your future career objectives? 3. What do you think are the characteristics needed to be successful in your future endeavours? To be able to have sufficient assessment of the above, it is expected that each answer would require a minimum of 120 words.

I hereby verify that all the information provided is accurate and true. Name: Designation: Official Stamp: *This section is to be completed by the Employer, Parent or Guardian/ Headmaster/ Principal/ Penghulu/ Government Office of Grade

*This section is to be completed by the Employer, Parent or Guardian/ Headmaster/ Principal/ Penghulu/ Government Office of Grade A within the residential vicinity. Should either parent is employed within the HALIM MAZMIN GROUP, this section is to be completed by the Head of Department/Section of the parent.

N. TERMS AND CONDITIONS

- 1. Registration fees are not transferable and refundable.
- Fees payable are shown in the programme fee structure. Please note that the UNIVERSITY reserves the right to review and revise fees annually. The fees indicated in the programme fee structure may not be applicable in the subsequent semesters (except the total tuition fee payable).
- Payment to the UNIVERSITY shall be made by bank draft or money order or cash to HM International Sdn Bhd. (Bank MAYBANK Account No. 5144-8651-2229).
- 4. The student must apply for deferment to the Registrar in writing. Please note that this can only be granted in exceptional circumstances, usually medical, and only when a reassessment opportunity is available at a future date.
- Students must inform the Registrar in writing if they are withdrawing from a course of study.
- There is strictly NO refund of all fees paid except for the tuition fee if notification of Withdrawal is received AFTER the Commencement of Programme.

- Application by International Student is subject to the timely approvals of the Ministry of Education Malaysia and Immigration Department.
- The UNIVERSITY and its management will not be held responsible for any damages, losses or injuries arising from the course of studentship with the UNIVERSITY.
- All students must abide by the Student Handbook and UNIVERSITY's Hostel Rules and Regulations. Failure to do so may result in expulsion, suspension, private or public sanctions.
- UNIVERSITY reserves the right to revise the Student Handbook and the Hostel Rules and Regulations without prior notice.
- All students are strictly prohibited from participating and intervening in any political activities.
- 12. UNIVERSITY reserves the right to accept or reject any application without assigning any reason.
- Any issues or complaints can be made to the Student Affairs Department.

O. CONSENT NOTICE FOR PROCESSING AND DISCLOSURE OF PERSONAL DATA

In order to process your application to attend the said programme(s) at MERITUS University, you are allowing MERITUS University to use and process your personal information / data for the purpose of your application, and to disclose the said data to any of its related entities or external third parties that may have a need to access such personal information / data pursuant to your application of the said programme(s).

The accuracy of the personal information / data to a large extent depends on the information you have provided. Therefore, kindly update MERITUS University as and when there is a change in your personal information provided earlier which may become incorrect or out of date.

P. DECLARATION OF CONSENT

I hereby give my consent to MERITUS University to use and process my personal information / data pursuant to my application of the programme(s) at MERITUS University and all other purposes which are required in relation thereto.

I further provide my consent for MERITUS University to disclose my personal information / data to:

- 1. any of its related entities; and/or
- 2. any external third parties

Signature	e:
Date:	
Q. DECLA	ARATION
	declare that all information furnished above are accurate and true to the best of my belief and knowledge and that the S University may terminate or withdraw this application should any information is discovered to be inaccurate or untrue.
Signature	
Date:	

that may have a need to access my personal information / data pursuant to my application of the said programmes(s) and all other purposes which are required in relation thereto.