

Application Form MSCB Group Scholarship

Please attach a recent photo here

Part I is to be completed by the Applicant.

Part II is to be completed by an Academic Referee who has personal knowledge of the Applicant's academic history.

Complete the form in BLOCK LETTERS. All details must be provided.

Applicants are to ensure that certified true copies of supporting documents are attached.

The completed Application Form should be returned to:

Human Resource Department
Malaysia Smelting Corporation Berhad
B-15-11, Block B, 15th Floor
Unit 11, Megan Avenue II
12, Jalan Yap Kwan Seng
50450 Kuala Lumpur

Only applications accompanied by complete documentation will be considered.

If the space provided is insufficient, please use separate sheet(s) of paper and number them appropriately.

PART I

PERSONAL PARTICULARS

Name:	
NRIC No:	Age:
Date of Birth:	
Gender:	Male Female
Marital Status:	Single Married Divorced Widowed
Race:	Malay Chinese Indian Others
Home Address:	
Correspondence Address:	
House Tel No:	Mobile No :
Office Tel No:	E-mail Address:
COURSE OF STU	U DY
Level	Undergraduate Postgraduate
Major Field of Stu (Please tick ONE box	

College/Institution/U	University Details. (Please attach letter of Admission / Offer):
Name of Institution	
Address	
Course applied / Pursuing	
Duration of Course	
Course Fees per Annum (estimated)	
Commencement Date	
Completion Date	

ACADEMIC QUALIFICATIONS

Please provide certified copies of result/certificates, including current semesters (if applicable)

No	Name of Institution /	Examination/Qualification	Year	Grade / Score
	School	Attained		
1				
2				
3				
4				

EXTRA CURRICULAR ACTIVITIES

Please provide certified copies of certificates of achievements (last **FIVE** years only)

No	Name of Uniformed Society or	Name of school	Achievement
	Activities participated	or Event	Attained
1			
2			
3			
4			
5			
6			

FAMILY PARTICULARS

Father's Name	Age
Address	Tel (House)
	Mobile No
Occupation	Annual Income
Employer	
Mother's Name	Age
Occupation	Annual Income
Employer	Mobile No

PARTICULARS OF CHILDREN / SIBLINGS

No	Name	Relationship	Age	Occupation	Name of Employer / School
1					School
2					
3					
4					
5					
6					

PARTICULARS OF SPOUSE (IF APPLICANT IS MARRIED)

Name		
NRIC No	Hou	use Tel No
Date of Birth	Mol	bile No
Gender Male Fen	nale Mar	rriage Date
PART II TO BE COMPLETED BY ACADEMI	IC REFEREE	
Name:		Occupation:
Institution:		Tel / Mobile:
E-Mail:		
Address:		
1. How long have you known the Applica	ant?	
year(s)	Month(s)	
2. How would you rate the Applicant's ac	cademic record and ability	? (Please check one)
Outstanding Excellence	Very Good C	Good Average Poor
3. In your opinion, how would you rate the students in the same course/intake?	he applicant's current acad	demic standing against other
Top 1% Top 5%	Top 10% N	Not in top 10%

4. Is the Applicant suitable for the proposed course of study?

Please give a brief comment on the applicant's strength and suitability.
5. Additional Comments (if any);
ON A SEPARATE SHEET OF PAPER, STATE WHY YOU DESERVE TO BE OFFERED THIS SCHOLARSHIP.
I hereby confirm that the above information is true and accurate, to the best of my knowledge and belief.
Signature Date:

DECLARATION BY APPLICANT:

I hereby declare that:

1.	All the information given in this Application form all the documents submitted are complete, true and correct. I authorize MSC to verify the information from whatsoever sources and by whatever means that MSC deems appropriate.				
2.	I understand that MSC reserve the right to forfeit my eligibility for the Scholarship or revoke any Scholarship approval granted to me or recall any Scholarship granted to me in the event that:				
	a)	Any of the information, statement of fact disclosed in this Application Form is false or incorrect; or			
	b)	If there is any misrepresentation of information, statement or fact in this Application Form; or			
	c)	If any of the documents submitted in support of this application is falsified or forged.			
		_			
3.		e never been made a bankrupt and there is no threatened, pending or existing uptcy proceedings commenced against me			
4.	I do no	ot have any criminal record.			
5	Lund	proteind and assent the foundation receive the right and has the absolute			
۶.	5. I understand and accept the foundation reserve the right and has the absolution discretion to approve or reject my application without assigning any reason				
	whats	oever and I accept all.			
6.	MSC applic	shall not be held responsible for any loss or delay in respect to this ation			
S	ignatur	e of Applicant Date			
Name	:				

NRIC No :