

Application Form MSCB Corporate Scholarship Program

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 Lot 6, 8 & 9, Jalan Perigi Nanas 6/1 Pulau Indah Industrial Park West Port, Port Klang 42920 Pulau Indah, Selangor

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.

Remarks*

All copies of the supporting documents can be certified by a government officer with grade 41 and above, solicitor, commissioner for declarations, notary public or university staff (Head of Department, Dean, Registrar or another authorized delegate).

PART I

PERSONAL PARTICULARS

Name:			
NRIC No:		Age	:
Date of Birth:			
Gender:	Male Female		
Marital Status:	Single Married	Divorced W	idowed
Race:	Malay Chinese	Indian O	othersPlease Specify
			Tionso speed,
Home Address:			
Correspondence Address (if different from			
Above):			
		\neg	
House Tel No:			Mobile No:
E-mail Address:			
COURSE OF ST	UDY		
Level	Diploma	Undergraduate	Postgraduate
Major Field of Stu (Please tick ONE box or			
(1. 10000 BOK OHE DOX OF	Mecha	nical Engineering	Mining Engineering
		cal Engineering	Metallurgical Engineering Minaral Bassaras Engineering
	Froces Geolog	s Engineering gy	Mineral Resources Engineering Other, please state:

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

ACADEMIC QUALIFICATIONS

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

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

*Remarks: Start with SPM

EXTRA CURRICULAR ACTIVITIES

Please provide certified copies of certificates of achievements.

No	Name of Uniformed Society or	Name of school	Achievement
NO	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 SIBLINGS

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

^{*} Please attached the latest 3 months pay slip with certified true copy.

PARTICULARS OF SPOUSE (IF APPLICANT IS MARRIED)

Name		
NRIC No	House Tel No	
Date of Birth	Mobile No	
No of Children	Marriage Date	

PARTICULARS OF CHILDREN

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

OTHER SCHOLARSHIP / FINANCIAL ASSISTANCE / LOAN

Do you receive any other scholarship/financial assistance currently? (If applicable)

No	From (Institution or Sponsor's Name)	Annual Amount	Duration	Type of Financial Assistance	Level of Studies
1					
2					
3					
4					
5					
6					

PART II

TO BE COMPLETED BY ACADEMIC REFEREE

Name:	Occupation:
Institution:	Tel / Mobile:
E-Mail:	
Address:	
1. How long have you known the Applicant?	
year(s) Month(s)	
2. How would you rate the Applicant's academic record and ability?	? (Please tick one)
Outstanding Excellence Very Good G	Good Average Poor
3. In your opinion, how would you rate the applicant's current acade students in the same course/intake?	emic standing against other
☐ Top 1% ☐ Top 5% ☐ Top 10% ☐ N	Tot 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 suital	bility.
5. Additional Comments (if any);	

belief.	and accurate, to the best of my knowledge and
Name:	Signature:
New NRIC:	Date:
PART III	

DECLARATION BY APPLICANT:

I hereby declare that:

1.	All the information given in this Application form and 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.	2. I understand that MSC reserve the right to forfeit my eligibility for the Scholarship or re any Scholarship approval granted to me or recall any Scholarship granted to me in the 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.						
	d)	Failed to complete the study or have to repeat the courses.						
3.		never been made a bankrupt and there is no threatened, pending or existing aptcy proceedings commenced against me						
4.	I do no	t have any criminal record.						
5.	discret	erstand and accept the foundation reserve the right and has the absolute ion to approve or reject my application without assigning any reason bever and I accept all.						
6.	MSC s	shall not be held responsible for any loss or delay in respect to this application						
S	ignature	e of Applicant Date	··					
Na	me	:						

NRIC No: