

ECOWORLD SCHOLARSHIP APPLICATION FORM

Appendix								
latest photo								

PART I - STUDENT PARTICULAR						* strike off non-relevant				
Full Name:								Age:		
As per name in Mykad								_		
MyKad		 						Gender:	M / F*	
Date of Birth	, <u> </u>				1		 -			
Home addre	D ess:	D M	M Y Y	YY	Correspo	ondence	e address (if d	ifferent):		
							(
Poscode		Sta	ate:		Postcode			State:		
Mobile No										
House tel. N	lo:									
E-mail Addr	ess:									
PART II - I			CKGROUND	& EXT	RACUR	CULA	R			
Examination	School / I	nstitution	n / University	Y	Year Grad		Grade	Detail results		
SPM										
STPM										
Matriculation / Foundation										
xtracuricular <i>i</i>	Activities (F	revious	& current)							
Socie	Society Position				Year			Activity		
ourse of stud	ies details									
ourse / Progra	mme:					Du	ıration of cou	ırse : <u>'</u>	years	
aculty:						.!		study Year	Sem	
niversity:							ar of comple	tion M M	YY	
ate of registrat	ion] ~ [~			Ca	mpus :			
						kin	dly attach the le	tter of offer		

PART III - PARENTS / GUARDIAN PARTICULAR

I MICI III - I MICE	115/00	JAND	17311	MILIC	CLIM				
	Fathe	r/Gua	rdian	(relations	ship :))	Mother / Guardian (Rela	ationship :)
Full Name									
						-			
MyKad No	<u> </u>					\downarrow			
Nationality	Mal	laysia	/ _			_	Malaysia /		
Telefon (Home) (Mobile)									
Place & Date of Birth									
Occupation									
Employer Name									
Office tel No						+			
Monthly income						+			
(RM)			pays	lip required			payslip requir	ed	
Partime & monthly income						T			
No of children	No of	childre	en		son	. 4a	ughter		
	1,40 01					_ , ua		end away *	
Marrital status for parent		Iregist	ered r	narriage	divorce separated	-	Father / Mother pass Father / Mother left ho		
Other financial Aid	Yes								
received by family	<u>No</u>						Monthly RM _		
PART 1V: SIBLI	NGS DE	TAIL.	S						
No. Full Name			Age				m/ school/ aid received/	Married	Staying
			7.90	M/F	if working: occup	oation	/ monthly income		Together
1								Yes / No	Yes / No
2								Yes / No	Yes / No
3								Yes / No	Yes / No
4								Yes / No	Yes / No
5								Yes / No	Yes / No
6								Yes / No	Yes / No
Were you received help to							efore)? Yes / No * since	(year)	to
Any of sibling currently re Name:	ceived E	co W	oria Fo Scl	oundation hool :	AIQ Yes / No	-	Standard / Form:		
Name: Since (year) : from		to					222, . 2		
PART V - OTHER Name of Organization / Co		Year		CHOLAR otal (RM)	SHIP RECEI	VEL	Details		
PTPTN	отпратту	1 641	' '	otal (IXIVI)			Details		
SCHOLARSHIP									
PART VI - FAMIL	Y MEM	1BER	THA'	T IS UN	WELL				
Full Name		Age	Re	lationship	Employed		Type of Sickness	Medical e	xpenses
		<u> </u>			Yes / No				
		—	+						
		<u> </u>							

PART VII - ASSET				
Motorbike:nos Yea	ar of Purchase:Year of Production :	Brand :	Instalment :RM	/ month
Car nos Yea	ar of Purchase :Year of Production :	Brand :	Instalment :RM	/ month
Asset owned by parents		Lain-lain :		
Fishing boat Sampan	Padi Field House for rent Land Shop	Vehicle for rent		
PART VIII - LIVING	CONDITION			
House Own Monthly payment RM	Rent a room /month rental	hostel	OthersNo payment r	
Type of houses: Low cost flat Medium cost apartmer Condominium / Apartn Bungalow	——————————————————————————————————————		Kampung House Shoplot Semi D Welfare Home	
PART IX - DECLARA	TION / REFEREES DETAILS			
	DECLARATIO	N		
condtions of the award. I agree	Signature of applicant	cholarship. I understar igree that the personal	d that the award can be w	vithdrawn if will be used
	Referee 1	Refere	e 2*(non family members or re	elatives)
Full name				
NRIC No				
Occupation				
Employer				
Working address				
Contact number				
Signature				

PART X - ESSAY

and why you deserved	the scholarship.		self, family background, course of study, ambition
	Fo	r office use only (pleas	e leave it blank) Interview result
Interviewed by:			Passed
interviewed by.			Fail
			Date:
			Date.
Date			
	Date:	Remark:	Application Status
Checked by:			Approved
Verifed by:			Rejected
Approved by:			Date:
			Bank Acc No.
			Name of Bank:

APPLICANT CHECKLIST COMPLETED APPLICATION FORM APPLICANT COPY OF MYKAD PARENTS PAYSLIP ARE REQUIRED / CERTIFIED INCOME ONLY FOR THOSE WITHOUT PAYSLIP COPY OF UNIVERSITY OFFER LETTER COPY OF SPM RESULT & STPM / MATRICULATION / FOUNDATION / PRE U RESULTS OR EQUIVALENT