



Institute of Science and Management

BURSARY APPLICATION FORM

CRITERIA:

- Applicant must be a **Malaysian citizen**.
- Applicant must fulfill the minimum entry requirements for the programme attending to study.
- Total household income must not exceed **RM7,000 per month**.
- Applicant must not be recipient of another scholarship or bursary.
- Selection is based on the financial needs of the applicant and the decision of the Scholarship and Bursary Committee (SBC) is final.

Photo

INSTRUCTIONS:

- This form must be submitted with the following documents:

1. A **CERTIFIED copy of Identity Card**
2. A **CERTIFIED copy of actual results of SPM or equivalent qualification**
3. A **copy of signed ISM offer letter**
4. **Reference letters from two referees**
5. **Latest Form B or BE of all family members who are having an income**
6. **The recent 3-month salary slips of all family members with who are gainfully employed**
7. **The recent 3-month electrical bills**
8. **The recent 3-month water bills**
9. **Further supporting documents requested by SBC (if any)**

(Items 1-2 may be certified by the school principal or ISM Registry upon presentation of the original documents.)

A. PROGRAMME ATTENDING

- A-Level
 Diploma in Business Studies
 Diploma in Accounting

Intake month: Jan / Apr / Aug (*delete where applicable*)

Intake year:

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B. PERSONAL PARTICULARS OF APPLICANT

Full Name	(English)	(Chinese, if any)
NRIC No.	Gender	Male / Female
Telephone (House) No.	Mobile No.	
Residential Address		
Mailing Address (If different from above)		
Email		

C. DETAILS OF APPLICANT'S PARENTS

	FATHER	MOTHER
Name		
NRIC / Passport No.		
Office Tel No.		
Mobile Phone No.		
Email		

D. INCOME DETAILS OF ALL FAMILY MEMBERS

No.	Names of All Family Members	Relationship	Age	Marital Status	Occupation & Employer (if working)	Level of Study & School (if studying)	Monthly Income (if any) (RM)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
TOTAL							

E. ACADEMIC RECORDS OF APPLICANT

Last School Attended		Year Graduated	
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ACTUAL Results of SPM or equivalent qualification _____ (please specify if applicable)

No.	Subject	Grade	No.	Subject	Grade
1.			7.		
2.			8.		
3.			9.		
4.			10.		
5.			11.		
6.			12.		

F. DECLARATION

I hereby declare that the information given in this form is true to the best of my knowledge. I understand that the bursary if so given could be withdrawn at any time if any information given in this form is subsequently found to be inaccurate.

 (Signed by Applicant)
 Name:
 Date:

 (Signed by Applicant's Parent)
 Name:
 Date: