INSTITUTE OF SCIENCE AND MANAGEMENT

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APPLICATION FORM (MALAYSIAN STUDENT)

INSTRUCTION					_	_					_	_	_		_	_	_
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Please write in BLOCK LETTERS (in BLACK or BLUE ink only).

All sections must be completed.

- 1 A non-refundable application fee of RM100 is payable for every application.
- (2) Attach four (2) passport-sized photographs with light blue background.
- (3) Attach one (1) set of certified true copy of actual or forecast results/academic qualifications.
- (4) Attach one (1) copy of IC.
- ⑦ Other supporting documents for your application (optional).
- (8) For outstation applicants, please bank-in or telegraphic transfer application fee to "INSTITUT SAINS DAN PENGURUSAN" (Public Bank Account No.: 3064605019), and attach the original bank-in slip as proof of payment with the application form.
- $(\underline{9})$ ISM reserves the right to accept or reject any application at its discretion.
- * Failure to comply with the above may result in a delay in processing the application.

1. PROGRAMME APPLIED FOR

<u>Centre for Foun</u> GCE 'A' Level	l (Science) GCE 'A' Level (Arts)		
<i>Centre for Busi</i> Diploma in B	ness Studies Diploma in Accounting		
Intake: M M	1 M / Y Y Y Y		
2. PERSONA	L DETAILS		
Full Name: (As in NRIC)		Chinese Name: (If any)	
Gender:	Male Female	Marital Status: Single Married	
Date of Birth:	D D / M M / Y Y Y	Place of Birth:	
NRIC No.:		Nationality:	
Race:	Chinese Malay India	Others:(Please	e Specify)
Religion:	Buddhism Christianity Islam	Hinduism Others:	
Mobile No.:		(Please Specify) House Tel No.:	
Email Address:			
3. PERMANE	INT ADDRESS		
Address:			
City/Town:		Postcode:	
State:		Country:	

Current Passportsized Photograph

4. MAILING ADDRESS

	Please tick if mailing address is the same as your permanent address.
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Complete the section below if your mailing address is different from your permanent address.

-			· · · · · ·		
Address:					
City/Town:				Postcode:	
State:				Country:	
5. DETAILS OI	F PARENTS				
Name of Father:				Name of Mother:	
NRIC/Passport No:				NRIC/Passport No	o:
Nationality:				Nationality:	
Occupation:				Occupation:	
Mobile No.:				Mobile No.:	
update, marketing ma		lo not want to receive		rom ISM, please tick the	events, invitation to graduation ceremony, programs e 'opt out option'. t out of future information from ISM
6. DETAILS O	F GUARDIAN ((OPTIONAL)			
Full Name:				Address:	
Mobile No.:					
Passport/NRIC No:				Relationship:	
update, marketing ma		lo not want to receive		on from ISM regarding e rom ISM, please tick the	events, invitation to graduation ceremony, programs 'opt out option'.
7. LAST ACAD	EMIC RECOR	0			
School/College/ University Name:					
Address:					
Name of Highest Qualification:	Degree Diploma	A-Level	UEC SPM	STPM Others:	Pre-U/Cert (Please Specify)
Result:	Actual	Forecast	Year Comp	leted:	

CCOMMODATION (APPLICABLE TO OUTSTATION ST	UDENTS ONLY)	
equired * Not Required		
quired, please complete the Accommodation Application Form and attach	it with this application form.	
DECLARATION		
undertake that I will comply with all policies, rules and regulations of Inst	titute of Science and Management.	
declare that the information given on this form is true and correct. I ackno	owledge that the provision of incorrect in	formation or
llse documentary evidence may result in my removal from the course. understand that I am liable for payment of all fees and that failure to pay a	any outstanding fees by the due date may	lead to
ancellation of my enrolment.	any outstanding lees by the due date may	ieau to
hereby permit Institute of Science and Management to release details of m	ny attendance report, examination results	and progress
t ISM to my parent(s), guardian and/or sponsor.		
hereby permit Institute of Science and Management to release my persona		
hether in Malaysia or in my country of origin / nationality, as a result of a urrently in force in Malaysia or in my country of origin / nationality, or pu		
in tendry in force in Malaysia of in my country of origin / nationality, of pu	in suant to any regar investigation in Malay	Sia Or III IIIy

nume of Applicant.		Signature of
Date:	D D / M M / Y Y Y Y	Applicant:
Name of Parent/Gu	ardian:	Signature of
Date:	D D / M M / Y Y Y Y	Parent/Guardian:

11. GENERAL INFORMATION

How did you know about Institute of Science and Management (ISM)? Please tick and name the source of publicity. You may tick more than one.

Newspapers:	Banners:
Magazines:	Billboard:
School Talk:	Counselors:
School Fair:	Agent:
Online Source:	Friends:
Brochures/Leaflet:	Family Members:
ISM Alumni:	Others:

FOR AGENT OR COUNSELOR USE ONLY	
Name of Agent/Counselor:	Contact No.:
Email:Address:	Signature:
	Date: D J M M J Y Y
FOR OFFICE USE ONLY	
Information and Student Services Centre:	
Application checked by:	Signature:
Designation:	olgilitati el
Remarks:	Date: D D / M M / Y Y
Student-Introduce-Student: Yes No	
Name of Student:	Signature of
Contact No.:	Student:
Programme:	Date: D D / M M / Y Y
Intakr/Year:	
<i>Registry:</i> Application received by:	
Name:	Date Received:
Application approved by: Name:	Designation:
Type of Offer: Unconditional Offer Cond	litional Offer Reject (see comment)
English Requirement: Yes No	
Offer Letter No.:	Signature:
Comments:	Date: D D / M M / Y Y

Reminder: You are allowed to use electronic signature in our application form and complete every section in the note listed then sent to admissions@ism.edu.my.