

PROGRAMME APPLICATION FORM

INSTRUCTIONS

- 1. Complete this form in BLOCK CAPITALS
- 2. Enclose all supporting documentation.
- 3. All supporting documents will become the property of Perdana University. They will not be returned.

4. Send your application to: Student Life Department

PERDANA UNIVERSITY

Block D (Level 1), MAEPS Building

MARDI Complex

Jalan MAEPS Perdana

43400 Serdang

Selangor Darul Ehsan

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+6019 912 6828

+6019 217 6547

enquiry@perdanauniversity.edu.my

www.perdanauniversity.edu.my



SECTION 1. PROGRAMME DETAILS

| Programme : | | |
|--------------------------------|---|-------------|
| | | Photo |
| | | 111000 |
| | | |
| SECTION 2. PERSONAL D | DATA | |
| Name as in NRIC (Malay | sian) or Passport (International) | |
| | | |
| | | |
| NRIC (Malaysian) or Pass | sport No. (International) | |
| | | |
| ID Type | Old ID MyKAD Polis Tentera | Passport |
| Date of Birth (dd-mm-y yyy) | - - *Gender Male | Female |
| Country of Birth | | |
| Country of Citizenship | | |
| *Marital Status | Single Married Divorced Widowed | |
| *Ethnicity (Malaysian only) | Malay Pribumi Chinese Indian | Others |
| *Religion | Muslim Buddhist Hindu Christian | Others ———— |
| SECTION 3. CONTACT D | ETAILS | |
| Permanent / Home / Par | rent's Address | I |
| | | |
| Postcode | City | |
| State | | 1 1 1 1 1 |
| Correspondence Addres | ss (please provide if different from above) | |
| | | |
| Doctor of o | | |
| Postcode | City | |
| State | Country | |
| | | 1 |
| Phone (Home) | | |
| Phone (Home) Phone (Mobile) | | |

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SECTION 4. FAMILY DATA

| A. FATHER | , | | | | |
|-----------------------------------|--------------------|-------------------|--------|-----------|-------------|
| Name as in NRIC (Malays | sian) or Passport | (International) | | | |
| | | | | | |
| | | | | | |
| NRIC (Malaysian) or Pass | sport No. (Interno | ational) | | | |
| | | | | | |
| ID Type | Old ID | MyKAD | Polis | Tentera | Passport |
| Date of Birth (dd-mm-yyyy) | | | | | |
| Country of Birth | | | | | |
| Country of Citizenship | | | | | |
| *Ethnicity (Malaysian only) | Malay | Pribumi C | hinese | Indian | Others |
| *Religion | Muslim E | Buddhist | Hindu | Christian | Others |
| Phone (Home) | | | | | |
| Phone (Mobile) | | | | | |
| Email Address | | | | | |
| | | | | | |
| Occupation | | | | | |
| B. MOTHER Name as in NRIC (Malays | sian) or Passpor | t (International) | | | |
| | | | | | 1 1 1 1 1 1 |
| | | | | | |
| | | | | | |
| NRIC (Malaysian) or Pass | sport No. (Interno | ational) | | | 1 |
| | | | | | |
| ID Type | Old ID | MyKAD | Polis | Tentera | Passport |
| Date of Birth (dd-mm-yyyy) | | | | | |
| Country of Birth | | | | | |
| Country of Citizenship | | | | | |
| *Ethnicity (Malaysian only) | Malay | Pribumi Cl | ninese | Indian | Others |
| *Religion | Muslim E | Buddhist | Hindu | Christian | Others |
| Phone (Home) | | | | | |
| Phone (Mobile) | | | | | |
| Email Address | | | | | |
| | | | | | |
| Occupation | | | | 1 1 1 | |

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| C. GUARDIAN OR SPO | OUSE | (IF APP | LICAB | LE) | | | | | | | | | | | | | |
|---|-------|------------|---------------------|----------|----------|---------|---------|-------|-----|--------|-----|-----|-------------------|-------|-------|---|----------|
| Name as in NRIC (Ma | alays | sian) or I | Passp | ort (Int | ernatio | nal) | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| NRIC (Malaysian) or | Pass | sport No. | . (Inter | rnation | nal) | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| ID Type | | Old ID | | Myk | (AD | | Polis | | Te | nter | а | | | Pass | sport | | |
| Date of Birth (dd-mm-yyyy) | | | | | | | | | | | | | | | | | |
| Country of Birth | | | | | | | | | | | | | | | | | |
| Country of Citizensh | nip | | | | | | | | | | | | | | | | |
| *Ethnicity (Malaysian only) | | Malay | | Pribu | umi | С | hinese | | lı | ndia | n | | Othe | ers _ | | | |
| *Religion | | Muslim | | Budd | hist | | Hindu | | Chr | istiaı | า 📗 | | Othe | ers _ | | | |
| Phone (Home) | | | | | | | | | | | | | | | | | |
| Phone (Mobile) | | | | | | | | | | | | | | | | | |
| Email Address | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Occupation | | | | | | | | | | | | | | | | | |
| D. FAMILY INCOME* (In Ringgit Malaysia - RM) |) | | | | | | | | | | | | | | | | |
| ≤ RM1000 | | R | M1001- | -RM200 | 00 | ١ | RM2001 | -RM30 | 000 | | | RM3 | 3001- | ·RM4 | 1000 | | |
| RM4001-RM5000 | | RN | /15001 - | -RM600 | 00 | I | RM6001 | -RM70 | 000 | | | RM7 | '001 - | RM8 | 000 | | |
| RM8001-RM9000 | | | F | RM >900 | 00 | | | | | | | | | | | | |
| *Information require | ed by | the Mir | istry c | of Educ | ation fo | or IFMS | S Datab | ase | | | | | | | | | |
| SECTION 5. EMERGE (if other than parent or g | | | | TAILS | | | | | | | | | | | | | |
| Contact Person | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | <u> </u> |
| Contact Number | | | | | | | | | | | | | | | | | |
| Email | | | | | | | | | I | ı | 1 | | | | | I | |
| | | | | | | | | | | | | | | | | | |
| Relationship | 1 | | | | | | | | | 1 | L | | | | | 1 | L |

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SECTION 6. EDUCATION BACKGROUND

| A. YR 11 or Equivalent | |
|---|-------------------------|
| SPM O Level | Others (Please Specify) |
| Year Enrolled | Completed (mm-yyyy) |
| Name of Institution | |
| | |
| | |
| Country of Institution | |
| | |
| Subject | Grade |
| 1 | |
| 2 | |
| | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| Actual Forecast B. YR 12 or Equivalent | |
| STPM A Level | Others (Please Specify) |
| Year Enrolled | Completed (mm-yyyy) |
| Name and Address of Institution | |
| | |
| | |
| Country of Institution | |
| | |
| Subject | Grade |
| 1 | |
| 2 | |
| 4 | |
| 5 | |
| 6 | |
| | |
| Actual Forecast | |

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| C. rerudry or Pro | ressional Qualifications | |
|----------------------------|--|---|
| 1 Qualification | | |
| Year Enrolled | Completed (mm-yyyy) | |
| Class of Award (if any) | CGPA out of (if any) | |
| Actual | Forecast | |
| Name of Institution | on | |
| | | |
| Country of Institu | | _ |
| | | |
| 2 | | |
| Qualification | | |
| Year Enrolled | Completed (mm - yyyy) - | |
| Class of Award (if any) | CGPA out of (if any) | |
| Actual | Forecast | |
| Name of Institution | on | |
| | | |
| | | |
| Country of Institu | tion | |
| | | _ |
| 3 Qualification | | |
| Year Enrolled | Completed (mm-yyyy) - | |
| Class of Award (if any) | CGPA out of (if any) | |
| Actual | Forecast | |
| Name of Institution | on | |
| | | |
| | | |
| Country of Institu | tion | |
| | | _ |
| | his form should you have more information to be submited for this section. | |
| D. English Langue | age (if applicable) | |
| English Test Taker | n IELTS TOEFL MUET OTHERS | |
| Completed (mm- | yyyy) | |
| Listening | Reading Writing Speaking Overall | _ |
| GCE O Level Englis | sh Score | |

PROGRAMME APPLICATION FORM

SECTION 7. DECLARATION AND SIGNATURE

A. Declaration by Applicant

activities and other interests.

- 1. I hereby verify that all information given in this application is complete, accurate and true to the best of my knowledge.
- 2. I hereby agree that Perdana University has the right to vary or reserve any decision in respect of my application in the event that the information given is found to be incomplete, inaccurate or false.
- 3. I give permission to Perdana University to have access to my personal data. I understand that this data will only be available to employees managing the information, to governmental authorities and to contracted service providers for the pursoses of providing service related to my application. The data shall not be shared without my permission unless ordered by a court of law.**
- 4. If I am admitted, I agree that I will honour the University's academic and ethical standards, and that I will abide by all requirements established by the University concerning academic progress, health and conduct.

| Signature of Applicant (ad- | -mm-yyyy) | | | |
|--|-----------------------------------|-----------------|--------------|---------|
| Name | | | | |
| ** please refer to www.perdanauniversity.edu.my/privacy-policy | | | | |
| SECTION 8. DOCUMENTS REQUIRED | | | | |
| All Applicants □ Completed Programme Application Form □ Completed Scholarship Application Form □ A copy of SPM/O Level/Yr 11 results (notarised translation required if not in □ A copy of STPM/A Level/Yr 12 results (notarised translation required if not □ A copy of tertiary or professional qualifications and transcripts (notarised □ 2 copies of Identity Card (Malaysian applicanty only) □ 2 full set of copies of passport inclusive of covers (international applicant □ 2 passport-sized photos □ Copy of MUET/IELTS/TOEFL results slip (if applicable) | in English) ed translation red | quired if not i | n English) | |
| ☐ Proof of Application Fee payment (please refer to the Fee Structure) | | | | |
| ADDITIONAL REQUIRED DOCUMENTS TO BE SUBMITTED (FOR SPEC | IFIC PROGRAM | ме) | | |
| Medical Degree Programme 5+0 in collaboration with Royal College of Surgary Academic Reference Form / Letter of reference from previous institution Personal Statement Essay (Sample will be provided) Curriculum vitae detailing work experience, professional or academic a activities and other interests. | 1 | | e, extra cur | ricular |
| Doctor of Medicine (MD) Personal Statement Essay (Sample will be provided) Themed Essays (Sample will be provided) Curriculum vitae detailing work experience, professional or academic a activities and other interests. | wards or researc | ch experienc | e, extra cur | ricular |
| Postgraduate and Research Programmes Bachelor's Degree results Master's Degree results (If applicable) Initial research proposal (For research programmes. Template will be proposal) | rovided) | | | |

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☐ Curriculum vitae detailing work experience, professional or academic awards, research experience, extra curricular

| Application Processing | |
|--|--------------------|
| Received By | Date - - |
| Processed By | Date - - |
| Offer of Admission | |
| Verified By | |
| Signature | Date _ _ _ _ |
| Comments | |
| Conditional Offer | |
| Verified By | |
| Signature | Date |
| Conditions | |
| 1 | |
| 2. 3. | |
| Review of Conditional Offer | |
| Conditions Met Conditions Not Met | |
| Verfied by | <u></u> |
| Signature | Date |
| Rejection | |
| Reason for Rejection | |
| Programme Limitations Do not meet re | equirements |
| Incomplete Documentation Did not clear i | nterview |
| Others | |
| Rejection Verified By | |
| Signature | Date _ _ |

SECTION 9. FOR OFFICE USE ONLY

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