APPLICATION FORM

(for Malaysian Students)

& MDISMalaysia

Important Note:

This application requires a non-refundable application fee of RM 500 payable to: MDIS Unicampus (Malaysia) Sdn Bhd.

For processing return this form and supporting documents to: **MDIS Malaysia** Strike 17, 02 - Lawel 17, Jacker Dokus, City, Structor (Office Toward), 100, 100, 100

Suite 17.02, Level 17, Johor Bahru City Square (Office Tower), 106-108, Jalan Wong Ah Fook, 80000 Johor Bahru, Johor, Malaysia

If you need assistance to complete this form please call: +607-2072 601 or email us: admission@mdis.edu.my

Confidentially Clause: MDIS Malaysia is committed to maintaining the confidentiality of the student's personal information and undertakes not to divulge any of the students' personal information to any third party without the consent of the student.

Please affix a recent passpost size photograph here

1. Personal Details	Please write in BLOCK LETTERS (in Black or Blue ink only)		
Name as in MyKad:		Surnam	e/Family Name:
MyKad No:	Date of Birth:	Place of Birth:	
Gender: Male Female	Marital Status: Single Married Divorced Widowed		
Race : ☐ Malay ☐ Chinese ☐ Indian ☐ Others			Religion:
Address:			Post Code:
Tel No.: Mobile No.:			
Email Address:			

2. Contact Details of Parent / Guardian				
Full Name as in MyKad:				
Relationship:	Tel No.:	Mobile No.:		
Full Home Address (Permanent) for correspondence:				
Email Address:		Occupation:		
3. Course Applied				

Course Name:

4. Educational Qualifications					
Educational Qualifications Awarded (e.g. SPM, UEC)	Institution (e.g. SMK Perling)	Year Enrolled (e.g. 2013)	Year Completed (e.g. 2013)	Date of Results expected (e.g. 2013)	

5. Work Experience				
Name of Company	From (DD/MM/YYYY)	To (DD/MM/YYYY)	Job Title	

6. Application Checklist

We thank you for your application to MDIS Malaysia. Please ensure the following documents accompany this application: □ Copy of the student's MyKad front and back

- □ Copy of parent/guardian's MyKad or passport (if student is under 21)
- □ Non-refundable application fee of RM 500 if payment by Bank Draft / Cheque, make out in favour of: MDIS Unicampus (Malaysia) Sdn Bhd
- □ 1 Certified true copy of your academic certificate / transcript for the following:
- SPM O-level SPTM UEC A-Level SAM AUSMET Diploma Forecast Other: _

7. Declaration			
ACKNOWLEDGEMENT AND AGREEMENT	DECLARATION BY PARENT / GUARDIAN (for students below 21 years of age)		
I have read and I fully understand the policies, terms and conditions of MDIS Malaysia. I further undertake to perform all such obligations and / or comply with all terms and conditions set out and to be performed or complied, on my part, particularly but not limited to payment of all monies payable.	I hereby agree to pay all fees due on the dates stipulated by MDIS Malaysia. I also understand and agree that if I default in paying the fees, MDIS Malaysia has the right to bar my child /ward from attending classes, including deregistration. I have also read and understood the conditions of		
I agree that any offer of placement is conditional on the accuracy of the information provided by me and upon my meeting the minimum pre-requisite results to enter such programme.	enrolment and agree to the terms as laid out. I further consent to the use by MDIS, without charge, my child/ward(s) personal information (including photographs or images or recordings of students) in any publicity and /or promotional exercise within MDIS. I hereby apply for his /her admission to		
I consent to the processing by MDIS Malaysia of personal data (including sensitive personal data as defined in the Data Protection Act 2010) about me for the proper purposes of the institutions within the MDIS group in	MDIS Malaysia as a full time student and I undertake to pay the full cost of this programme until complete.		
support of this application on the understanding that it may be used for all	Name of Parent / Guardian:		
purposes within the policies and procedures governing privacy laws within MDIS Malaysia.	(as per MyKad / Passport) MyKad / Passport No		
I further confirm and consent to the use by MDIS without charge, my personal information in publicity and / or promotional exercise within MDIS	Relationship:		
Group and including without limitation photographs / images or recordings,	In the event of an emergency, please contact:		
the publishing of examination results, the award of a prize or scholarship, any achievement, academic or otherwise. I hereby authorize MDIS	Name / Relationship:		
Malaysia to release relevant information to MDIS Alumni Association, Career Enhancement Department and any external bodies as required.	Full address:		
I certify that the information provided in this application form is correct and			
complete.	City: PostCode: State:		
Signature of Student:			
Name:	Signature of Parent / Guardian:		
Date:/ (dd/mm/yyyy)	Date://(dd/mm/yyyy)		
SIBLINGS	For Official Use only		
We would appreciate it if you could write the names of your younger	Payment date:		
siblings below.	Payment Amount:		
Name: Form this year:	Receipt No:		
Name: Form this year:	Batch no:		
	Commencement date:		
	Reference No: To be completed by agent:		
	Agent Name:		
	Marketer in-charge:		