



10th Anniversary Bursary

Bursary Application Form

A. PERSONAL PARTICULARS (Please use BLOCK LETTERS)

FULL NAME	<input type="text"/>			PHOTO
E-MAIL	<input type="text"/>			
ADDRESS	<input type="text"/>			
PERMANENT ADDRESS	<input type="text"/>			
PERMANENT TEL NO.	<input type="text"/>	MOBILE NO	<input type="text"/>	
TEL NO.	<input type="text"/>	NRIC NO. / PASSPORT NO	<input type="text"/>	
GENDER	<input type="checkbox"/> M <input type="checkbox"/> F	MARITAL STATUS	<input type="text"/>	
DATE OF BIRTH	<input type="text"/>	AGE	<input type="text"/>	
NATIONALITY	<input type="text"/>	RACE	<input type="text"/>	

B. TYPE OF BURSARY APPLIED FOR (Please tick one)

<input type="checkbox"/>	50% + 50% (Local Student) Foundation Program
<input type="checkbox"/>	30% (International Student) Foundation Program
<input type="checkbox"/>	30% (Local & International Student) Undergraduate Program <i>Not Applicable for Bachelor of Computer Science (Honours) in Data Science</i>
<input type="checkbox"/>	30% (Local & International Student) Postgraduate Program

***TERMS & CONDITIONS :**

1. Student is entitled to apply for the bursary upon meeting the minimum Entry Requirement of the program applied.
2. Student must maintain CGPA of 3.5 in yearly academic year to entitle for the following year Bursary for undergraduate and postgraduate programs.

PROGRAM APPLIED:



C. DETAILS OF PARENTS, GUARDIAN OR NEXT OF KIN

FATHER'S NAME

MOTHER'S NAME

NRIC NO. / PASSPORT NO

NRIC NO./ PASSPORT NO

OCCUPATION

OCCUPATION

MOBILE PHONE NO.

MOBILE PHONE NO.

D. ACADEMIC RECORDS

HIGHEST TERM EXAMINATION PASSED: SPM/ 'O' Levels/ Year 10 STPM/ 'A' Levels / Year 10

PRE UNIVERSITY CGPA : _____ BACHELOR CGPA : _____ MASTERS CGPA : _____

SCHOOL NAME/ INSTITUTION _____ YEAR _____

NO	SUBJECT	GRADE	NO	SUBJECT	GRADE
1			6		
2			7		
3			8		
4			9		
5			10		

Please **attach CERTIFIED TRUE COPIES of results/ transcripts** with this application form.
Trial/forecast exam results are accepted on a conditional offer.

(Complete this section in detail. You may attach a separate sheet, if required)

NO	SPORTS/CURRICULUM	POSITION HELD	YEAR
1			
2			
3			
4			
5			
6.			

I hereby declare and confirm that all information given by me as above is true and correct and that I make this declaration in full knowledge and awareness of PERDANA UNIVERSITY's reliance on the above information as a basis for consideration to grant the bursary to me.

Applicant's Signature

Date

E. OFFICE USE – PERDANA UNIVERSITY

DATE APPLICATION RECEIVED :

RECOMMENDED FOR : Yes [] No []

: [] % **Bursary**

PROPOSED BY

Signature	Name	Designation	Date
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APPROVED BY

Signature	Name	Designation	Date
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