

For office use only	REG. NO.:	
	Intake:	Course Code:

COURSE APPLIED FOR

Intake: JAN APR MAY JUN JULY SEPT _____ Year: _____

Please tick (✓) the course you are applying for:

DIPLOMA - KOLEJ TAFE SEREMBAN

- Aircraft Maintenance Technology
- Automotive Engineering
- Electrical & Electronics Engineering
- Electro-Mechanical Engineering
- Civil Engineering
- Information Technology
- Management
- Accountancy

CERTIFICATE - KOLEJ TAFE SEREMBAN

- Business
- Computing
- Engineering

JABATAN PEMBANGUNAN KEMAHIRAAN

- Level 1 - Automotive Technician
- Level 2 - Motor Vehicle Technician (T-TEP)
- Level 2 - NGV System Installer
- Level 3 - Motor Vehicle Senior Technician
- Level 4 - Automotive Executive
- Level 1 - Junior Electrical Technician
- Level 2 - Electrical Technician
- Level 2 - Computer System Assistant Technician
- Level 3 - Computer System Technician
- Level 4 - Computer System Assistant Executive

OTHERS

PERSONAL PARTICULARS

Name:

IC No.: - - **Passport No.:**

H/P Number: - **Gender:** Female Male

Date of Birth: - - **Place of Birth:**

Nationality:

- Malaysian Sri Lankan Filipino Myanmar Japanese
- Singaporean Korean Nepalese Vietnamese Maldivian
- Indian Indonesian Pakistani Siamese Middle East
- Bangladeshi Nigerians Others: _____

Marital Status:

- Single Married

Religion: Islam Hinduism Buddhism Christianity Others: _____

Race:

Malay: Malay

Chinese: Hakka Hokkien Cantonese Others: _____

Indian: Tamil Telugu Malayalam Punjabi Indian Muslim Others: _____

Sarawakian: Iban Bidayuh Murut Melanau Malay Others: _____

Sabahan: Bajau Dusun Murut Kadazan Others: _____

Please attach recent photograph here

PARENTS DETAILS

Father's Name:	<input type="text"/>																													
Father's Contact No.:	<input type="text"/>	-	<input type="text"/>	Father's IC No.:	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>																					
Father's Occupation:	<input type="text"/>															Father's Income per Month:	<input type="text"/>													
Mother's Name:	<input type="text"/>																													
Mother's Contact No.:	<input type="text"/>	-	<input type="text"/>	Mother's IC No.:	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>																					
Mother's Occupation:	<input type="text"/>															Mother's Income per Month:	<input type="text"/>													

CORRESPONDENCE DETAILS

Residential Address:	<input type="text"/>																													
Postcode:	<input type="text"/>					State:	<input type="text"/>										Country:	<input type="text"/>												
Contact No.:	Telephone:	<input type="text"/>	-	<input type="text"/>	H/P :	<input type="text"/>	-	<input type="text"/>																						
Permanent Address: (if different from above)	<input type="text"/>																													
Postcode:	<input type="text"/>					State:	<input type="text"/>										Country:	<input type="text"/>												
Contact No.:	Telephone:	<input type="text"/>	-	<input type="text"/>	H/P :	<input type="text"/>	-	<input type="text"/>																						

ACCOMMODATION

NO YES
[Hostel / Apartment]

CRIMINAL CONVICTION

You are required to provide details of any criminal conviction. If no, please write "NIL".

MEDICAL HISTORY

If you are physically disabled, please state the nature of your disability. If no, please write "NIL"

Any medical condition which may be of concern: Asthma Color Blindness Heart Condition NIL

Allergies, Specify: _____ Others, please state: _____

EMERGENCY CONTACT (Person to be contacted in an emergency)

Contact Person:	<input type="text"/>															Relationship:	<input type="text"/>														
Correspondence Address:	<input type="text"/>																														
Contact Number:-	Telephone :	<input type="text"/>	-	<input type="text"/>	H/P :	<input type="text"/>	-	<input type="text"/>																							

ACADEMIC RECORD (certified result/ transcript copies to be attached)

Please fill up the grade as per the original government exam results.

Exam	PMR		SPM		'O' Level / 'A' Level	
School						
Year						
	Subject	Grade	Subject	Grade	Subject	Grade
	Malay Language		Malay Language			
	English		English			
	Mathematics		Mathematics			
	Science		Science			
	History		Physics			
	Geography		Chemistry			
	KHB					

Name Of Institute	Name Of Course		Grade/Score
Name Of Institute	English Language	Year	Grade/Score

FINANCIAL SUPPORT

Please tick (✓) the relevant financial support:

- Study loans (PTPK / PTPTN / MARA / MIED / NLFCS)
- Scholarship : _____
- I am supporting myself/ by my family
- I am fully sponsored by my employer/ home government (attach relevant documents)
- Others (Please specify) _____

OTHER DETAILS

How did you learn about us?

- Brochures/ Banner
 Newspaper
 Radio/ TV
 Roadshow
 Agents
 Website
 Friend/Ex-Student
 Magazine
 Family
 School
 Offer Letter
 Others

Details: _____

DECLARATION - Please read this declaration carefully before signing.

I declare that all information given by me in this application is correct to the best of my knowledge and agree to be bound by the rules and regulations of Kolej TAFE Seremban. I understand that any false information given or withheld will affect the decision on my application, and may result in ineligibility for admission or termination. I also agree to :

- 1) Abide by the College Policies, Rules and Regulation at all times.
- 2) Pay all fees on time.
- 3) Accept that the college reserves the right to amend and add existing policies, fees, rules and regulations as it deems fit.
- 4) I understand that I have the responsibility to inform the college of any changes in contact numbers or address.
- 5) I fully understand that the college is authorized to release, to any relevant parties, information concerning my application. I agree to hold the college free of any liability for releasing any such information.

Signature of Applicant

Signature of Parent/Guardian
(if applicable)

Date:

FOR OFFICE USE ONLY

For Marketing Department Use Only

Payment	Amount (RM)	<input type="checkbox"/> I/C <input type="checkbox"/> Academic Result <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport Size Photo <input type="checkbox"/> Offer Letter <input type="checkbox"/> Insurance Form	Remarks:	Accepted By:	Verified By:
Entrance Fee			 Name: Date:
Facilities Fee					
Accommodation					
Tuition Fee					
TOTAL		Total course Fee: RM payable in installments of RM each.			

For Finance Department Use Only

Date	Receipt No.	Amount (RM)	Received By	Remarks
.....
.....
.....

Entry Qualifications

- Unconditional
 Conditional Approval
- Remarks:

 Date:
 Principal

wef: 1 JAN 2012