



SPECIALIST CERTIFICATE IN BUSINESS ADMINISTRATION (SCBM)

Photo
Gambar

APPLICATION FORM

1. PERSONAL PARTICULAR / BUTIR-BUTIR PERIBADI	DATE OF BIRTH:
NAMA PENUH :	MARITAL STATUS:
NRIC:/ NO.KP:	
CITIZENSHIP: / TARAF WARGANEGARA:	
RESIDENTIAL ADDRESS: / ALAMAT KEDIAMAN:	
TEL NO: / NO. TEL:	H/P:
BUSINESS/ OFFICE ADDRESS: / ALAMAT PEJABAT:	
TEL. NO: / NO. TEL:	FAX: EMAIL:
POSTAL ADDRESS (if different from above): ALAMAT SURAT-MENYURAT	
2. CURRENT APPOINTMENT / JAWATAN SEKARANG (if self-employed, retired, or unemployed, please indicate accordingly)	
JOB TITLE:	DATE OF APPOINTMENT:
NAME OF EMPLOYER:	

School/Collages/Universities/Institutions/ Course Organisers	Date		Degree/ Diploma Types of Courses Attended	Grade Obtained (Where Applicable)
	From	To		
4. CAREER HISTORY/BUTIR-BUTIR PENGALAMAN				
Employer's Name & Address			Position	From - To

I certify that information that I have given in this application form is correct. I agree to the condition that the university has the right to reject this application, to withdraw the offer of admission or to terminate my study if any information given is found to be incorrect. I also observe and ensure payment of all fees and other liabilities

Date: _____

Signature: _____

IMPORTANT: Documents Need To Be Attached	For Office Use Only
1. PERSONAL PARTICULARS	Remarks
YES NO	
2. Photocopy of Certificate (2 copies)	
3. Passport Size Photograph MUST with Collar Dress (4 copies)	
4. New I.C. (2 copies)	
5. Registration Fee RM 150.00 (Not Refundable)	