

# ISBAUK Thinking Skills ACADEMY

## APPLICATION FORM (For INTERNATIONAL STUDENTS ONLY)

Please tick [  ] To Select The INSTITUTION

[  ] ISBAUK Thinking Skills ACADEMY

[  ] ISBAUK Thinking Skills COLLEGE

Section A: To be completed by applicant (Please write in BLOCK LETTERS)

### PERSONAL INFORMATION

1. Name (as in Passport): \_\_\_\_\_
2. Passport No: \_\_\_\_\_ 3. Expiry Date: \_\_\_\_\_
4. Nationality: \_\_\_\_\_ 5. Date of Birth: \_\_\_\_\_
6. Marital Status: \_\_\_\_\_ 7. Gender: \_\_\_\_\_
8. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Contact No. (Residence): \_\_\_\_\_ Mobile No.: \_\_\_\_\_
10. E-Mail Address: \_\_\_\_\_ 11. Religion: \_\_\_\_\_
12. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Do you suffer from any physical disability or illness? If so, please specify the nature of these conditions. Otherwise, state "None".

### COURSE APPLICATION DETAILS

PROGRAMMES		
CERTIFICATE & DIPLOMA IN COMPUTER SYSTEM (SIJIL & DIPLOMA SISTEM KOMPUTER)		Full Time ( <input checked="" type="checkbox"/> )
(IT020_34INT072017) IT-020-3:2013 (Level 3)	Computer System Operation (Operasi Sistem Komputer)	
(IT020_34INT072017) IT-020-4:2013 (Level 4)	Computer System Administration (Pentadbiran Sistem Komputer)	

<b>PROGRAMMES</b>		
<b>CERTIFICATE &amp; DIPLOMA IN OFFICE ADMINISTRATION (SIJIL &amp; DIPLOMA PENTADBIRAN PEJABAT)</b>		<b>Full Time (✓)</b>
<b>(FB024_234INT072017) FB-024-2:2012 (Level 2)</b>	<b>Office Administration (Pentadbiran Pejabat)</b>	
<b>(FB024_234INT072017) FB-024-3:2012 (Level 3)</b>	<b>Office Administration Supervision (Pejabat Pentadbiran Penyeliaan)</b>	
<b>(FB024_234INT072017) FB-081-4:2012 (Level 4)</b>	<b>Information System Administration (Pentadbiran Sistem Maklumat)</b>	
<b>CERTIFICATE IN HOSPITALITY-FOOD &amp; BEVERAGE (PERSIJILAN HOSPITALITI-MAKANAN &amp; MINUMAN)</b>		<b>Full Time (✓)</b>
<b>(HT010_23INT072017) HT-010-2:2012 (Level 2)</b>	<b>Food &amp; Beverage Service Operation (Operasi Perkhidmatan Makanan &amp; Minuman)</b>	
<b>(HT010_23INT072017) HT-010-3:2012 (Level 3)</b>	<b>Food &amp; Beverage Service Operation (Operasi Perkhidmatan Makanan &amp; Minuman)</b>	

2. Preferred Date of Admission: \_\_\_\_\_

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## ACADEMIC QUALIFICATIONS

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**1. Qualification (Please use additional sheet of paper if space available is insufficient)**

a) O-Levels / Equivalent: \_\_\_\_\_ Year Taken: \_\_\_\_\_  
(Please specify)

Name of School / Institution: \_\_\_\_\_

Address of School / Institution: \_\_\_\_\_

\_\_\_\_\_

Commencement Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Tick (✓) if the medium of instruction was English  
*(If it was not in English, please provide a certified true copy of the English translation)*

NO	SUBJECT	GRADE
1		
2		
3		
4		
5		
6		
7		
8		

b) A-Levels / Equivalent: \_\_\_\_\_ Year Taken: \_\_\_\_\_  
(Please specify)

Name of High School / Institution: \_\_\_\_\_

Address of School / Institution: \_\_\_\_\_

\_\_\_\_\_

Commencement Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Tick (✓) if the medium of instruction was English  
*(If it was not in English, please provide a certified true copy of the English translation)*

NO	SUBJECT	GRADE
1		
2		
3		
4		
5		
6		
7		
8		

- c) Other Qualification(s):  
*(If the certificate of award was not in English, please provide a certified true copy of the English translation)*

<i>Name of Award</i>	
<i>Level of Study</i>	
<i>CGPA / Grade</i>	
<i>Year Awarded</i>	
<i>Examining Body</i>	
<i>Name of College / University / Institution</i>	
<i>Address of College / University / Institution</i>	

**2. English Language Proficiency:**

----- IELTS	----- TOEFL	OTHERS: _____ (Please specify)
Score: _____	Score: _____	Score: _____
Year Taken: _____	Year Taken: _____	Year Taken: _____

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**EXTRA-CURRICULUM ACTIVITIES**

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- Sports: \_\_\_\_\_
- Uniform: \_\_\_\_\_
- Clubs / Societies: \_\_\_\_\_

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**PARTICULARS OF PARENT / GUARDIAN**

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- Name (as in Passport): \_\_\_\_\_  
(Parent / Guardian)
- Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Relationship: \_\_\_\_\_
- Occupation: \_\_\_\_\_
- Contact No.: \_\_\_\_\_ (H/O) Fax No.: \_\_\_\_\_
- Mobile No.: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

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## EMERGENCY CONTACT

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In case of emergency, the person to contact:

1. Name of Parent / Guardian: \_\_\_\_\_  
(Parent / Guardian)
2. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_
3. Relationship: \_\_\_\_\_  
\_\_\_\_\_
4. Contact No.: \_\_\_\_\_ (H/O)      Mobile No.: \_\_\_\_\_
5. E-Mail Address: \_\_\_\_\_

In case of emergency, the person to contact:

1. Name of Parent / Guardian: \_\_\_\_\_  
(Parent / Guardian)
2. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_
3. Relationship: \_\_\_\_\_  
\_\_\_\_\_
4. Contact No.: \_\_\_\_\_ (H/O)      Mobile No.: \_\_\_\_\_
5. E-Mail Address: \_\_\_\_\_

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## OTHER CONTACTS

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In case of emergency, the person to contact:

1. Name: \_\_\_\_\_
2. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_
3. Relationship: \_\_\_\_\_  
\_\_\_\_\_
4. Contact No.: \_\_\_\_\_ (H/O)      Mobile No.: \_\_\_\_\_
5. E-Mail Address: \_\_\_\_\_

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## IMMIGRATION VISA

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1. Do you hold any type of Malaysian Visa Now: Yes / No

If yes, the type of Visa: \_\_\_\_\_

The Expiry Date of the Visa held: \_\_\_\_\_  
(dd/mm/yy)

2. For applicant who is currently a student / was formerly a student of another University / College / Institute in Malaysia:

University / College/ Institute: \_\_\_\_\_

Course: \_\_\_\_\_

Date of Joining: \_\_\_\_\_ Date of Leaving: \_\_\_\_\_  
(dd/mm/yy) (dd/mm/yy)

Reasons for Leaving the Course: \_\_\_\_\_  
\_\_\_\_\_

Duration of Student Visa is shortened to: \_\_\_\_\_  
(dd/mm/yy)

*(Important: For applicant who is currently / was formerly a student of another University / College / Institute in Malaysia, please submit together with this application form the following documents from the other University / College / Institute:*

- a) *the original Institution Leaving Certificate / Release Letter.*
- b) *a certified true copy of Testimonial / Academic Transcripts*
- c) *a certified true copy of the Attendance Report / Letter*

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## FINANCIAL RESOURCES

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1. Name of Sponsor: \_\_\_\_\_

2. Relationship: \_\_\_\_\_ Occupation: \_\_\_\_\_

3. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

*(Note: Attach the past 6 months Bank Statement)*

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## ACCOMMODATION

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Require assistance in arranging for Accommodation: Yes / No

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**AGENT DETAILS**

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1. Name of Agent: \_\_\_\_\_
2. Name of Company: \_\_\_\_\_
3. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_
4. Contact No. : \_\_\_\_\_ (H/O) Mobile No.: \_\_\_\_\_
5. E-Mail Address: \_\_\_\_\_

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**DECLARATION BY APPLICANT**

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I declare that the above information provided by me in connection with this application is true and correct. I understand that ISBA (UK) ACADEMY reserves the right to withdraw the offer of admission or ask me to leave the ACADEMY at any time if such information is found to be false or incorrect.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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**CHECKLIST**

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Completed application form must be submitted together with the following documents:

1. Certified true copy of the certificate of award
2. Academic transcripts
3. Certified true copy of actual English Language Proficiency test result
4. Certified true copy of School Leaving Certificate
5. Certified true copy of Birth Certificate
6. 3 sets of photocopied Passport (All pages of your passport including blank pages) and Attendance Report / Letter (Applicant transferring from another University / College in Malaysia and holding a Student Pass or Dependent Pass)
7. 8 Passport Size Photos
8. Medical Examination Report
9. Student Declaration Form

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**APPLICATION INSTRUCTIONS**

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Please send the application form to:  
ISBAUK Thinking Skills Academy  
Level 9, Lot 9-03A, Brem Mall Kepong,  
Jalan Kepong 52000 Kuala Lumpur, Malaysia.  
Tel: 603-62577452 / 62577457 / 62577459  
Fax: 603-62577465

**SECTION B: For Office Use**

<b>Date Receive</b>	<b>Complete and Processed</b>	<b>In Complete</b>
	<p>..... Certified true copy of certificate of award</p> <p>..... Certified true copy of English Language Proficiency qualification and results.</p> <p>..... Certified true copy of School Leaving Certificate / Birth Certificate</p> <p>..... 3 sets of photocopied Passport</p> <p>..... 8 passport-sized color photographs</p> <p>..... Medical Report</p> <p>..... Student Declaration Form</p> <p>..... <i>(Applicant transferring from another University / College in Malaysia and holding a Student Pass or Dependent Pass)</i></p> <p>.....<i>the original Institution Leaving Certificate / Release Letter.</i></p> <p>.....<i>a certified true copy of Testimonial / Academic Transcript</i></p> <p>.....<i>a certified true copy of the Attendance Report / Letter</i></p>	<p>..... Certified true copy of certificate of award</p> <p>..... Certified true copy of English Language Proficiency qualification and results.</p> <p>..... Certified true copy of School Leaving Certificate / Birth Certificate</p> <p>..... 3 sets of photocopied Passport</p> <p>..... 8 passport-sized color photographs</p> <p>..... Medical Report</p> <p>..... Student Declaration Form</p> <p>..... <i>(Applicant transferring from another University / College in Malaysia and holding a Student Pass or Dependent Pass)</i></p> <p>.....<i>the original Institution Leaving Certificate / Release Letter.</i></p> <p>.....<i>a certified true copy of Testimonial / Academic Transcript</i></p> <p>.....<i>a certified true copy of the Attendance Report / Letter</i></p>

**A. Department of International Development / Department of Admissions and Credit Evaluation**

Name of Staff-in-charge: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_  
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**B. Department of International Development / Department of Admissions and Credit Evaluation**

Name of Staff-in-charge: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_  
 \_\_\_\_\_