

ISBAUK Thinking Skills COLLEGE

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 (APPROVED BY MQA / LAN)		Full Time (<input checked="" type="checkbox"/>)
DBM_INT 072017	Diploma in Business Management (Diploma Pengurusan Perniagaan) JPT/BPP(K) 1000-600/WP161(5) (A7010) (06/17)	
DIF_INT 072017	Diploma in Islamic Finance (Diploma dalam Kewangan Islam) JPT/BPP(K) 1000-600/WP161 JLD3(5) (PA4352) (10/19)	
DIE_INT 072017	Diploma in English (Diploma Bahasa Inggeris) JPT/BPP(K) 1000-600/WP161 JLD(9) (04/20)	
DIA_INT 072017	Diploma in Accounting (Diploma dalam Perakaunan) JPT/BPP(K) 1000-600/WP161 JLD4(8) (09/21)	
CIE_INT 072017	Certificate in English Language (Sijil dalam Bahasa Inggeris) JPT/BPP(K) 1000-600/WP161(36) (A7114) (01/17)	

2. Preferred Date of Admission: _____

ACADEMIC QUALIFICATIONS

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: _____

EXTRA-CURRICULUM ACTIVITIES

- Sports: _____
- Uniform: _____
- Clubs / Societies: _____

PARTICULARS OF PARENT / GUARDIAN

- Name (as in Passport): _____
(Parent / Guardian)
- Permanent Address: _____

- Relationship: _____
- Occupation: _____
- Contact No.: _____ (H/O) Fax No.: _____
- Mobile No.: _____ E-Mail Address: _____

EMERGENCY CONTACT

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: _____

OTHER CONTACTS

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: _____

IMMIGRATION VISA

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*

FINANCIAL RESOURCES

1. Name of Sponsor: _____

2. Relationship: _____ Occupation: _____

3. Permanent Address: _____

(Note: Attach the past 6 months Bank Statement)

ACCOMMODATION

Require assistance in arranging for Accommodation: Yes / No

AGENT DETAILS

1. Name of Agent: _____
2. Name of Company: _____
3. Correspondence Address: _____

4. Contact No. : _____ (H/O) Mobile No.: _____
5. E-Mail Address: _____

DECLARATION BY APPLICANT

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

Name of Applicant

Signature of Applicant

Date

CHECKLIST

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

APPLICATION INSTRUCTIONS

Please send the application form to:
ISBAUK Thinking Skills College
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

Date Receive	Complete and Processed	In Complete
	<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: _____

B. Department of International Development / Department of Admissions and Credit Evaluation

Name of Staff-in-charge: _____ Date: _____

Remarks: _____

