



الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
يُونُسُ بْنُ سَيِّدِي اسْلَامُ اَنْبَا اِبْعَسَا مِلْدَسِيَا

MANAGEMENT SERVICES DIVISION

APPLICATION FORM FOR STUDIES

Section A : To be completed by the applicant

1. Full Name (Capital Letters):

2. (i) Postal Address :

(ii) Contact Number:

(iii) Email Address:

3. Identity Card No. [Please attach a Photostat copy of your IC]:

4. Citizenship:

(i) If Malaysian, please state Bumiputra or Non Bumiputra:

(ii) If non-Malaysian, please state Nationality :

5. Date of Birth:

6. Place of Birth:

7. Age:

8. Present Position:

9. Date Appointed :

10. Kulliyah / Department :

11. Present Salary:

12. Date of Confirmation in Service (if applicable):

13. Previous Employment / Occupation
(if space is inadequate, please attach appendix)

Previous Employment / Occupation	Employer (Name and Full Address)	Last Drawn Salary	Duration	
			Date Commenced	Date Ended

14. Marital Status: Single / Married / Widowed / Divorced

15. Name of Wife / Husband:

16. Wife / Husband's Identity Card No.:

17. Number of Children:

Name of Children	Date of Birth	Age

18. Please state whether your spouse is undergoing or has undergone studies under a Government Scholarship. (If answer is yes, please specify the name / type of scholarship):

19. Please state whether your wife/husband/children will be relocating with you at your course destination (Please note that if answer is yes, the Dependants' Declaration Form (attached herewith) must be signed and submitted to the University) :
YES /NO

20. Academic / Professional Qualifications:

[Please attach copies of certificates and examination transcripts. Please also state details on degree – e.g. Honours, 2nd Class Upper and CGPA]

School / College University	Date / Year		Type of Certificate / Diploma / Degree	Class CGPA	Date Awarded
	From	Till			

21. Academic Publications : If this space is inadequate, please attach appendix.

Title of Publication	Publisher	Date of Publication	Place of Publication	Volume Number	No. of Pages

22. Research Activities: if space is inadequate, please attach appendix

[please state research projects which you have undertaken and specify the time taken to complete it]

Research Project	Sponsor / Funder	Duration	Status (Ongoing / Completed)

23. Are you bonded by any contract to serve any institution: YES / NO

24. If yes, please state the name of the institution and number of years you are bonded:

25. Address of University to pursue your studies (It is compulsory to attach Letter of Offer):

26. Course / Programme :-

(i) Field of Study :

(ii) Area of specialization :

(iii) The degree which will be awarded :

(iv) Date of commencement:

(v) Duration of Course / Programme :

(vi) Tuition Fees Schedule :

27. Please list all the subjects that will be taken and please submit details of the subject from the information brochure of the university concerned. (Please attach appendix if space is inadequate).

28. If a dissertation or a thesis is involved, please submit title and a brief summary of your intended dissertation or thesis proposal and reason as to why you chose the particular research topic. Please attach the proposal as an appendix.

29. For Masters (Clinical), please submit four (4) years study plan. Please attach the study plan as an appendix.

30. Have you ever pursued any similar programme / degree before. If yes, please state:-

- (i) When:
- (ii) Where:
- (iii) Result:

31. State your teaching load and administrative duties, if any, during the last two (2) academic years.

32. Other University/ies which had offered you a place of study. Please attach letter of offer.

33. TOEFL score (Please attach copy of result)

34. IELTS score (Please attach copy of result)

35. GMAT score (Please attach copy of result)

36. Have you received any financial aid / scholarship / sponsorship for the Programme / Course applied : YES / NO

37. If yes, please state the name of the sponsor and the amount of scholarship / fellowship

38. If no, will you self-sponsor / self finance all costs for the Programme / Course : YES / NO

39. I do undertake covenant and agree that if you accept / approve my application for studies with financial assistance and allowances, I shall :-

- (i) enter upon and diligently undergo and pursue the course of study or training leading to an award of higher degree [hereinafter called the “**Course**”] at an institution approved by the University or at such place or places in Malaysia or elsewhere as the University may from time to time direct or as the Course may require;

- (ii) successfully complete the Course within the time as shall be prescribed by the University or such extended period as the University may approve and upon such terms and conditions as the University deems fit (at its absolute discretion). For the avoidance of doubt, completion of Course shall mean the successful completion of the Course and the conferment of the degree;
- (iii) upon completion of the Course, compulsorily serve a period of bond [hereinafter called the “**Compulsory Service**”] to be determined by the University at its absolute discretion.

40. I also declare and confirm that prior to the submission of this application to the University:-

- (i) I have read and understood the University’s Rules and Regulations pertaining to Scholarship and Study for Academic Staff / Fellowship for Academic Trainee and all policies, circulars, directives or guidelines and I acknowledge and accept that I shall be responsible for any breach thereof and that the University may, at their absolute discretion take such action against me as deemed necessary;
- (ii) I have read and understood the terms and conditions of the University’s Study Agreement and I acknowledge and accept the terms and conditions provided therein and agree to abide by them;
- (iii) the information furnished to the University in this application or any other form or document submitted to the University is true and accurate and does not contain any false and/or misleading information;
- (iv) I agree and give my free consent to the University to obtain information related to my studies / Course from the relevant bodies / authorities.

41. I further agree that if the University accepts / approves my application to pursue studies, but I:-

- (i) fail to complete the Course for whatsoever reason whether within the time specified by the University or such extended period as is approved by the University at its absolute discretion; and/or
- (ii) breach any of the terms and conditions of the Study Agreement;

I shall be responsible / liable to reimburse and refund to the University on demand within fourteen (14) days:-

- (a) all monies paid to and expended by the University on behalf of me including any Financial Assistance, Allowances, Scholarship and/or Tuition Fees (whichever is applicable);

- (b) administrative costs equivalent to 5% of the total amount of Financial Assistance, Allowances, Scholarship and/or Tuition Fees (whichever is applicable) expended by the University or any part thereof as may be determined by the University at its absolute discretion.

42. I understand and agree that in the event of my breach of the terms and conditions of the Study Agreement:-

- (i) the University shall be entitled to suspend or stop payment of any Financial Assistance, Allowances, Scholarship and Tuition Fees;
- (ii) I shall be liable to pay on full indemnity basis, all costs and expenses (including the University's solicitors' fees and any Government taxes in respect thereof) incurred in connection with or incidental to the University's enforcement of its rights and provisions against me.

Signature of Applicant :

Date:

Name:

NRIC No:

NOTE: Please forward this application through your Head of Department

Section B : To be completed by the Head of Department

1. STRUCTURE OF PROGRAMME:

- (i) Please state whether the programme chosen involves both coursework and thesis and the anticipated duration of time for each section.
- (ii) Please state whether the subjects taken by the applicant are in line with the academic programme of the Department
- (iii) Please state the title of thesis or dissertation proposed by the candidate to be undertaken by him / her and please state how the research project fits into the University's academic programme.
- (iv) Please specify the significance of the thesis / topic chosen to the IIUM / Malaysia etc.
- (v) Please clarify new findings / differences of the thesis from those that have been written within the same area / scope / specialization.
- (vi) Please state whether the duration of the programme as stated in the letter of offer to the applicant is ample. If not, please state the reasonable duration of time and please give reasons for the extended period.

2. ABILITY OF APPLICANT

- (i) Please comment on the academic performance of the applicant and give your opinion on the ability of the applicant to follow the programme of study in his / her field leading finally to Ph.D.

- (ii) Please comment on whether the applicant can finish the programme applied for within the given time.
- (iii) Please ascertain the language proficiency of the applicant to follow the programme effectively in the medium of instruction required. Please also state qualifications as proof of proficiency.

3. STATUS OF UNIVERSITY / INSTITUTION

- (i) Please state whether the University / Institution is considered proper and competitive in the field of study chosen by the applicant.
- (ii) Please state the strength of the University / Institution and Department and how established it is on the programme to be pursued.
- (iii) Is the University / Institution accredited by :-
- (a) the proper local academic authority in the country where the programme is conducted:
- (b) the Malaysian Government:
- (iv) University ranking : QS WUR (by University) :
QS WUR (by Subject) :
THE (by University) :

Signature :

Date:

Name:

Designation:

Section C : To be completed by the Dean

1. DEAN'S COMMENTS:

2. THIS APPLICATION IS *SUPPORTED / NOT SUPPORTED AND THE APPLICANT * COULD / COULD NOT BE RELEASED FROM HIS / HER DUTIES AT THE KULLIYYAH / CENTRE / DEPARTMENT IN ORDER TO PURSUE HIS / HER POSTGRADUATE DEGREE

Signature :

Date:

Name:

Designation:

NOTE: The Dean / Head of Department is requested to submit this form to the Management Services Division

* Delete where not applicable

ADDITIONAL INFORMATION To be Completed by the Applicant

1. Research Methodology / Quantitative Analysis Course

Have you attended the Research Methodology / Quantitative Analysis Course conducted by the University?	YES / NO
If yes, please state when and where:	
Please attach copy of certificate	
If you have not attended the course, when do you plan to take up the course?	

2. English Language Proficiency

Have you sat for the TOEFL, IELTS or any other similar English Language Examination	YES / NO
If yes, when did you sit for the test and what was the score	
Please attach copy of result	

3. Please indicate whether your first degree is with 1st class honours, 2nd upper or 2nd lower :-

4. Perbadanan (Tabung Pedidikan Tinggi Nasional (PTPTN) Status :

- Not Blacklisted
 Blacklisted

[Please provide evidence from PTPTN]

I hereby certify and confirm that the above information is true and correct.

Signature :

Date:

Name:

Designation:

DEPENDANTS' DECLARATION FORM

To be Completed by the Applicant

1. Enter the information requested for your spouse and dependant children who will be relocating with you to your course destination. This declaration form is required if you intend to seek the University's approval for family allowance and housing allowance as part of your financial assistance and allowances.
2. For each dependant listed below, you must provide certified true copies of marriage certificate (or Surat Perakuan Nikah), birth certificate(s), identity card(s) and/or passport(s) (whichever is applicable).
3. Take note that the University reserves its rights to refuse your application unless the relevant supporting documents are submitted by the Applicant and the University reserves its rights to impose such terms and conditions as deemed necessary.
4. This Declaration Form forms part of the Application Form for Studies.

Full Name of Dependant(s)	Birth Certificate / Identity Card No.	Age

5. Please state the address where you will be relocating to:-

I hereby declare and confirm that the above information is true and correct.

Signature :

Date:

Name:

Designation: