

## UNIVERSITI TUNKU ABDUL RAHMAN

# IR CHAN YEW KAI SCHOLARSHIP

Please tick (v) the checklist:

Criteria Checklist:

A Malaysian citizen (17 – 23 years old);
Only students in their first year (full time) are eligible to apply;
The household income of parents/guardian must belong in B40 Income Group (<RM4,000.00 permonth);
Maintain CGPA of 3.0000 and above in every trimester

Please make sure all columns are fill up with necessary information    Name:				SECTIO	N Δ – PI	ERSONAL INFOR	ΙΤΔΜ	ON		
1. Name:							NIVIA I I	014		
(as in Identity Card)  2. Faculty:	(Please mak	e sure all columns are fill	up with r	necessai	y inforn	nation)				
2. Faculty:	1. Name:									
3. Intake Year (e.g. May 2011) Student Reg. No:		(as in	identity C	.ard)						
4. Date & Place of Birth:	2. Faculty	y:Programme:Sex: Male/Fema							Sex: Male/Female*	
5. Home Address:	3. Intake Year (e.g. May 2011)Student Reg. No:									
6. Correspondence Address:  Tel. No: Headphone No:  E-mail:  SECTION B – FAMILY INFORMATION  7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)  Name	4. Date & Place of Birth:Nationality:									
Tel. No: Headphone No:  E-mail:  SECTION B – FAMILY INFORMATION  7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)    Name	5. Home A	5. Home Address:								
SECTION B – FAMILY INFORMATION  7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)    Name	6. Corresp	ondence Address:								
SECTION B – FAMILY INFORMATION  7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)    Name	Tel. No:		Headph	one No	:					
SECTION B – FAMILY INFORMATION  7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)    Name   Age   Occupation   Single/Married/ Separated/Divorced /Widowed   Income (RM)   Income from Other Sources (RM)										
7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)    Name	E-mail:_									
7. Details of Parents'/ Guardian's financial circumstances. (To submit supporting document as listed in the checklist)    Name				SECTION	ON B – I	FAMILY INFORM	ΛΑΤΙΟΙ	N		
Name Age Occupation Single/Married/ Separated/Divorced /Widowed Income (RM) Other Sources (RM)  Father Guardian Income (RM) Other Sources (RM)  8. Details of sibling(s): If working If studying										
Name Age Occupation Separated/Divorced /Widowed Other Sources (RM)  Father Guardian Supplies	7. Details	of Parents'/ Guardian's f	inancial c	ircumst	ances. (	To submit supp	orting	document as liste	ed in the che	:CKlist)
Father (RM)  Mother  Guardian  8. Details of sibling(s):  If working  If studying		Nama		٨٥٥		Dogunation			Monthly	,
Mother  Guardian  8. Details of sibling(s):  If working  If studying		Name		Age		occupation			Income (RI	M) I
8. Details of sibling(s):    If working   If studying   If	Father									
8. Details of sibling(s):    If working   If studying	Mother									
If working If studying	Guardian									
If working If studying	8. Details	of sibling(s):								
Monthly   Name of		1				lj	worki		I,	
Name Relationship Age Occupation Income (RM) Level School/ Institution/ College/ University		Name	Relation	nship	Age	Occupati	on	Income	Level	School/ Institution/ College/
SECTION C – FINANCIAL INFORMATION				SECTIO	N C – FII	NANCIAL INFOR	MATI	ON		
9. List sources of financial support for your studies in the University and indicate amount:	9. List sou	irces of financial support	for your	studies	in the U	niversity and in	dicate	amount:		
Education Living Allowance					Edu	cation			Living Allow	/ance
Relationship	_	•								
Amount Frequency										

<sup>\*</sup>Delete whichever not applicable
\*\* If there is insufficient space in this form, please attach additional sheets of paper

10. Have you APPLIED to any other source for financial assistance for the <u>CURRENT YEAR</u>?

Please tick appropriately:		☐ YES ☐ NO					
Name of Scholarship/Loan		Month of Application			Status of Applic	cation	
Have you ever been AWARDER     or other sources?	<b>D</b> any bursary, scl	holar	rship/ loan or financial assistance	e from the	University or ar	ny government	
Please tick appropriately:		/ES	□ NO				
If Yes, specify:							
Name of Scholarship/Loan being Awarded	<b>Duration</b> [eg: 2019-2020]		Packages of the Scholarship / Loan [eg: 100% tuition fee, RMXXX monthly allowance etc]	Scholars	us of the ship/Loan as today	Remark (if any)	
				☐ On-go	ing 🖵 Ended		
				☐ On-go	ing 🖵 Ended		
	I			1	"		
		CE	ECTION D - OTHERS				
		3E	CHON D-OTHERS				
12. Property (Currently Staying with	Family) (To subn	nit su	upporting document as listed in th	ne checklist	):		
Item			Please circ	le/ fill in r	necessary		
Do your parents own a house?		:		Yes / No			
How many properties own?		:					
Type of property (e.g. Single/double house/ Apartment )	ole Terrace	:					
Owner of the property (Full Nam	ne)	:					
Relationship with Applicant							
Year of Purchased							
Monthly Installment / Rental		:					
Number of members staying in the house							
13. Vehicle(s) Record Own by Family Member(s) (To submit supporting document as listed in the checklist):							
Category Model of Vo		ehicle (1) Model of Vehic		le (2)	Model of Vehicle (3)		
Year of Purchased							
Price of Vehicle							
Year of Installment							
Owner of the Vehicle							
Monthly Installment							
User							
*Delete whichever not applicable							

<sup>\*\*</sup> If there is insufficient space in this form, please attach additional sheets of paper

Room Rental  Fransportation				Monthly Cost (RM)				
ood								
Study Material								
Others:								
			TOTAL					
15. Health Condition	of Family membe	er (To submit suppo	rting document as listed	in the che	cklist):			
Relationship	Sickness		Treatment	Treatment Cost		Treatment Frequency		
16 Utility Cost Recor	d (To submit supr	porting document a	s listed in the checklist):					
10. Othicy Cost Record	a (10 submit supp			1	Latast 2 Manth	ns of Water Bill		
		Latest 3 Months of	Electricity Bill		Latest 3 iviontr			
Amount	L	Latest 3 Months of	Electricity Bill	1	Latest 3 Montr			
lonth			re than RM 100.00 and w	vater bill is				
Month *Please provide the ju	ustification if the d	electricity bill is mod		vater bill is				
*Please provide the ju	ustification if the d	electricity bill is mod	re than RM 100.00 and w	vater bill is		20.00.		
*Please provide the ju	ustification if the o	electricity bill is mo			more than RM 12			
*Please provide the ju	ustification if the o	electricity bill is mo	re than RM 100.00 and w	□ Enc	more than RM 12	20.00.		
*Please provide the ju	ustification if the o	electricity bill is mo	re than RM 100.00 and w	□ Enc	more than RM 12 Status ded -going	20.00.		
*Please provide the ju	ustification if the o	electricity bill is mo	re than RM 100.00 and w	□ Enc □ On:	Status  ded -going	20.00.		
*Please provide the ju	ustification if the o	electricity bill is mo	re than RM 100.00 and w	□ Enc □ On:	Status  ded -going ded -going	20.00.		

<sup>\*</sup>Delete whichever not applicable
\*\* If there is insufficient space in this form, please attach additional sheets of paper

	SECTION E - JOSTIFICATION
19.	Please state the reason(s) of your application. (Focus on family financial status)
20	
20.	Please state the reason(s) for choosing the programme.
21.	Please state your future plan after graduation.
	SECTION G – DECLARATION BY STUDENT
22.	I affirm that the above information is complete, true and correct, and understand that if I am offered the financial aid, the University reserves the right to withdraw the offer when at any stage, it is found that the information given is incorrect or if, in the opinion of the University, I have failed to make satisfactory progress in my studies or disciplinary action has been taken against me by the University.
	Date:

<sup>\*</sup>Delete whichever not applicable \*\* If there is insufficient space in this form, please attach additional sheets of paper

## SECTION H - CHECKLIST FOR APPLICANT (COMPULSORY)

Part I: Applicant/Student Information
One (1) certified true copy of Identity Card (Front and Back)
One (1) recent passport size photo
Latest transcripts (including SPM, STPM/A level/UEC or equivalent qualification)
Extra-curricular activity reports and certificates
Compulsory to read the "Instructions for application" at Page 7
Part II: Family Information
Copy of parent/guardian IC (front and back)
Parent/Guardian's latest income tax (B Form ), or latest three-months' pay slip, or Declaration letter from
Jabatan Angkat Sumpah".
Part III: Financial Situation
Other Bursary/ financial aid agreement/ statement (eg: PTPTN)
Cost of family member is on long term medication (if any), need to provide supporting document such as
medical report / receipt
Latest 3 month water and electricity bills
Home photos: indoor (living room, kitchen, bedroom), outdoor (front of house)
A photo of the vehicle owned by the family (front and back, visible with license plate and model)

For more information, please email financialaid@utar.edu.my

INCOMPLETE Application Form will NOT be PROCESSED!
Only successful applicants will be notified.

#### IR CHAN YEW KAI SCHOLARSHIP APPLICATION

## Information for Making Application for Ir Chan Yew Kai Scholarship

(Please read the following information before you complete the application form.)

### I. Eligibility Criteria

- 1. Citizen of Malaysia (17 23 years old)
- 2. Only students in their first year (full time) are eligible to apply
- 3. The household income of parents/guardian must belong in B40 Income Group (<RM4,000.00 per month)
- 4. Maintain CGPA of 3.0000 and above in every trimester

#### II. Referees

Names of referees are required to be given by each applicant. One should be an academic reference who is able to comment on the applicant's academic abilities while the other should be able to comment on the applicant's financial circumstances.

Referees should preferably not be related to the applicant but are able to provide information on the applicant. Names of referees who are fellow students or students from other institutions will not be accepted.

## III. Submission of Application

Completed application form must be submitted with all supporting documents to the **Department** of **Scholarships and Financial Aid, UTAR** by **8 November 2024.** 

#### IV. Application Status Enquiry

For enquiry on the status of application, please refer to the **Department of Scholarships and Financial Aid, UTAR.**