

UNIVERSITI TUNKU ABDUL RAHMAN

SILVERLAKE SCHOLARSHIP APPLICATION

Please tick (V) the checklist:

Crite	eria Checklist:
	Has obtained admission to Universiti Tunku Abdul Rahman (UTAR) in full Bachelor Programme except MK FMHS Programme;
	A Malaysian citizen (17 – 23 years old);
	Only students in their second year (full time) are eligible to apply;
	The household income of parents/guardian must belong in B40 Income Group (<rm4,000.00 month);<="" per="" th=""></rm4,000.00>
	Maintain CGPA of 3.0000 and above in every trimester



Scholarship Application Form

	SEC	CTION A - PE	ERSON <i>A</i>	AL INFORMATION				
(Please make sure all columns are fill up wit								
Name:		Ic. No	Ic. No.: Sex: Male/Female					
Intake Year (e.g. Oct 2022):		Student Reg. No:						
Faculty:			ramme:					
Date & Place of Birth:		_	nality:					
Home Address:								
Correspondence Address:								
Tel. No:		Hand	lphone	No.:				
E-mail:								
L								
	SI	ECTION B – I	FAMILY	INFORMATION				
Details of Parents'/ Guardian's financial cir	rumsta	nces (To su	hmit sı	innorting docume	ent as listed in	the checklist)	
Jesus of Carlotte (.pporting docume	us iisteu iii	-		
				Single/M	arried/	Monthly	I (ITDAT	
Name	Age	Occupat	ion	Separated/Divo		Income (RM)	Sources	
Father						(1)	(RM)	
Father								
			Ciasla (Massisal/ Monthly				Income from	
Name	Age	Occupat	ion	Single/M Separated/Divo		Income	OTHER	
			Separated/Divorced/Widowed (RM)					
Mother								
							Income from	
Name	Age	Occupation		Single/M		Monthly Income	Other	
, and	7.80	Оссирис		Separated/Divo	rced/Widowed	(RM)	Sources (RM)	
Guardian			(NW)					
For office use only								
Details of sibling(s):								
		If working If studying Monthly Name of						
Name Rela	ationship Age		e Occupation		Income	School/	Level	
					(RM)	Institution/ College/		
						University		

	SECTION C – FINANCIAL INFORM	MATION
ist sources of financial support for your	studies in the University and indicate a	amount:
	Education	Living Allowance
Relationship		3
Amount		
Frequency		
* If there is insufficient space in this form, Personal monthly expenses (estimation)		
Category	Monthly Cost (RM)	Remark (if any)
Rental		
Transportation		
Food		
Study Material		
Other		
ТОТА	L	
1) Room Rent (if any) Please specify if the rental fee is include Area of the rental (Example: Cambridge		Answer:
Type of room (Example: Single/Room)		
2) Transportation		Answer:
Travel to campus		
lave you ever been AWARDED any burs: ources? Please tick appropriately: If Yes, specify:	ary, scholarship/ loan or financial assis	stance from the University or any government or oth
Name of Scholarship/Loan	Status	of the Scholarship/Loan as at today
	□ Approved [%]	
	☐ On-going	
	☐ In progress	
	☐ Terminated	
	☐ Approved [%]	
	☐ On-going	
	☐ In progress	
İ	□ Terminated	

				SECTION	D - OTHERS					
Property (Currently Staying	g with Fami	ly) (To	subn	nit supporting do	cument as listed	in the ch	necklist):			
Do your parents own a hou	se? Yes / No)								
How many properties do yo	our parents	own? _		_						
					Type of	propert	у			
Item		(Example: Single/Double Terrace house/ Apartment /Flat)								
	Туј	pe:			Туре:			Type:		
Monthly Installment / Rer	ntal									
Year of Purchased										
Year of Installment								1		
Name of owner	n+									
Relationship with Applica Number of members stay								1		
the house including you										
Who are the family memb	ers									
staying in the house inclu										
you?										
Vehicle(s) Record Own by I	Eamily Man	abor(s)	/To 6	uhmit cunnortin	r document ac lie	ctad in th	na shaski	ic+\.		
venicie(s) Record Own by i	raililly ivieli	ibei (s)	(103	submit supporting	g document as in	steu III ti	ie checki	istj.		
Category					Mo	odel of V	ehicle			
category		_								
Monthly Installment										
Year of Purchased										
Year of Installment Owner										
Price of Vehicle										
User										
Car Certificate (Compulso	ry)									
, ,				l .		I			ı	
*Delete whichever not applie	cable									
** If there is insufficient space	e in this fori	m, plea	se at	tach additional she	eets of paper					
Health Condition of Family	member (T	o subn	nit su	pporting docume	ent as listed in th	ne checkl	ist):			
Health Condition of Family member (To submit supporting document as listed in the checklist):										
Relationship Sickness				Treatment Cost			Treatment Frequency			
					•		l .			
Utility Cost Record (To sub	mit support	ting do	cume	ent as listed in the	e checklist):					
		Latest	2 1/16	onths of Electricity	, Dill	I	Latest	3 Months	of Mod	tor Pill
Amount		Latest	الاا د	mais or Electricity	וווט ץ		Laiesi	2 IVIUITUIS	Ji Wd	ווע וווו
Month										
For office use only										
*Please provide the justifica	ation if the e	electrici	ity bi	II is more than RIV	1 100.00 and wat	er bill is	more tha	n RM 120.	00.	

Part Time Job	Experience (if any):				
Year	Duration	Role	Range of Salary Earning	Status	Remark (if any)
				☐ Ended	
				☐ On-going	
				☐ Ended	
				☐ On-going	
				☐ Ended	
				☐ On-going	
		SECT	ION E – JUSTIFICATION		
1. If yo	u were UNSUCCESSFUL i	n obtaining a schola	rship from the University	, how do you propose to	finance your studies?
2. Plea	se share your plan to cor	ntribute to the socie	ty after graduation.		
		SECTION	F – DECLARATION BY STU	JDENT	
reserves	the right to withdraw the ersity, I have failed to m	e offer when at any s	stage, it is found that the	information given is incor	Financial aid, the University rect or if, in the opinion of a taken against me by the
Date:				Signature of Applican	
				Signature of Applican	ι

	SECTION H – CHECKLIST FOR APPLICANT (COMPULSORY)						
Го signify th	nat the submission has been completed, mark the checkbox on the checklist. [Compulsory]						
	1. Applicant/ Student Information						
	One (1) recent passport size photo						
	One (1) certified true copy of Identity Card (Front and Back)						
	Latest transcripts (including SPM, STPM/A level/UEC or equivalent qualification)						
	Extra-curricular activity reports and certificates						
	2. Family Information						
	Copy of parent/guardian IC (front and back)						
	Parent/Guardian's latest income tax (BE Form), or latest three-months' pay slip, or Declaration letter from Jabatan Angkat Sumpah". If self-employed, B form is required.						
	3. Photo of a house which family members are currently staying:						
	Front image of the house with house number						
	Living Hall						
	Bedroom of yours						
	Kitchen						
	4. Vehicle(s)						
	Photo(s) of Vehicle [Note: Car model / information must tally with information provided in the application form. Car plate number must be captured in the photo(s).]						
	Car Certificate(s)						
	5. Photo of House Utility Billings which family members are currently staying:						
	3 consecutive months of Water Bills						
	3 consecutive months of Electricity Bills						
	6. Agreement of PTPTN (if any). Only 1 st page of the agreement is required.						
	IMPORTANT: The applicant must arrange the aforementioned documents in: a single document All the supporting documents submit have been certified true copy correct order name the document with your full name (name of scholarship) Eg: Tan Lee Lim (XXX Scholarship) Completed application form must be submitted with all supporting documents to the Department of Scholarships and Financial Aid, UTAR by 10 February 2023						
	For more information, please email financialaid@utar.edu.my INCOMPLETE Application Form will NOT be PROCESSED! Only successful applicants will be notified.						