



**TAR UC Sports Scholarship Awards Application Form**

**INSTRUCTIONS**

- a) Strictly for Malaysian only
- b) Please use **BLOCK LETTERS** only
- c) Attach a copy of all relevant documents
- d) Incomplete applications will automatically be disqualified
- e) State or national athletes who represented state or Malaysia in the National or International Sanctioned Games or Championships

PHOTO

**SECTION A - PERSONAL INFORMATION**

Full Name: <i>(As per NRIC)</i>		NRIC No:
Home Address:	Postal Address:	
Home Tel No:	Handphone No:	
Date of Birth:	Age:	Gender:
Email:		

**SECTION B - PROGRAM APPLIED**

Programme: \_\_\_\_\_ Intake: \_\_\_\_\_

Campus:     Kuala Lumpur     Penang     Perak     Pahang     Johor     Sabah

**SECTION C - QUALIFICATION (Please tick and attach a certified copy of certificate)**

SPM     O - Level  
 STPM     A - Level     Matriculation     Diploma  
 Others. (Please state) \_\_\_\_\_    CGPA: \_\_\_\_\_

**SECTION D- SPORTS PARTICIPATION AND ACHIEVEMENT INFORMATION (Please attach additional copy if required)**

	TYPE OF SPORT	LEVEL	INVOLVEMENT PERIOD	REMARKS
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

**SECTION E - EXTRACURRICULAR ACTIVITIES/AWARD (Please attach certified copies of testimonial and certificate)**

Year	Name of Award	Award

**SECTION F - FAMILY BACKGROUND**

<b>I.</b>	<b>Father / Guardian</b>	<b>Mother</b>
Full Name		
NRIC No.		
Home Address		
Telephone No- (Home) (Handphone)		
Age		
Nationality		
Occupation (if retired, state the previous occupation)		
Name and address of employer / own business. If retired, state name and address of previous employer.		
Office Telephone No.		

**II. Particulars of all brothers & sisters**

Name	Age	Gender	Marital	Relationship	Occupation/ School/	If working, please state	Contact No.

**SECTION G - DECLARATION BY APPLICANT**

**I certify that the information I have given in this application is complete and correct. I understand that any false declaration in my application will be grounds for immediate termination of this Scholarship.**

Date: \_\_\_\_\_

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

Name: \_\_\_\_\_