



YAYASAN TOH LI HUA SPONSORSHIP
Living Expenses
APPLICATION FORM

SECTION A: PROGRAMME

Foundation : _____ Bachelor : _____
Intake : _____ Intake : _____

SECTION B : PERSONAL INFORMATION (PLEASE USE BLOCK LETTERS)

Full Name (as in I.C / Passport):

I.C No:

Gender : Male Female
Race : Malay Dayak : _____
 Chinese Others : _____

Email Address:

Contact No. (Home):

Hand phone No. :

SECTION C : ACADEMIC & LEAD POINT INFORMATION

New Students: Please indicate below your entry qualification.

Result: SPM O- Level UEC Other: _____

CGPA (If applicable): _____

Other Students: Please state your latest CGPA and LEAd point.

Semester: _____ CGPA: _____

LEAd Point (From 2nd semester onwards):

** Please attach certified photocopy of result slip and offer letter.*

SECTION D: PARENT / GUARDIAN INFORMATION

Parent / Guardian Name (as in I.C / Passport):

I.C No.:

Hand phone No.:

Occupation:

Income per month (RM):

Spouse / Guardian Name (as in I.C / Passport):

I.C. No:

Hand phone No.:

Occupation:

Income per month (RM):

Total household income per month (RM):

** Please attach certified copy of Parent's or Guardian's current pay slip or Form J (income tax statement).*

Dependents details:

Name	Age	Gender	School	Relationship

SECTION E: DECLARATION

I declare that the information contained in this form and in the attached documents are true and accurate. I acknowledge that University College of Technology Sarawak reserves the right to seek from other relevant bodies verification as to the standing of my claimed qualifications. I further acknowledge that the institution reserves the right to vary or reverse any decision regarding sponsorship application. Incorrect or incomplete information to be found false at any stage, the scholarship will be terminated immediately.

Applicant signature

Date

SECTION F: STUDENT DEVELOPMENT AND SERVICES DEPARTMENT

Received by: _____

Name: _____
Designation: _____
Date: _____

Remarks: _____

SECTION G: BOARD OF TRUSTEES DECISION

Approved Not Approved

Name: _____
Designation: _____
Date: _____

** The criteria and regulations may be changed from time to time by the Board of Trustees.
** UCTS reserves the right to recommend or otherwise any application to the Board of Trustees.

Please return completed application form to Student Development & Services Department (SDSD) by _____ . Late application will not be entertained.