

FWD Takaful Berhad

Undergraduate Scholarship Programme Application Form

Please read the following instructions carefully before completing the application:

1. Each applicant can submit ONE application only.
2. All required supporting documents MUST be certified 'true copies' as per the original documents by the relevant authorities.
3. All fields in the form must be filled up properly and clearly and must not be left blank. State "Not Applicable" or "NA" for areas that are not applicable to you.
4. Ensure your application is for courses at the public and/or private universities and/or colleges approved by FWD Takaful only, for which you could gain acceptance to.
5. Please send the duly completed form with all the required supporting documents latest by **23 April 2021** to:

Please paste your recent passport-sized photograph here

Human Resource (Scholarship Programme)
 FWD Takaful Berhad
 Level 29, Menara Shell
 No. 211, Jalan Tun Sambanthan
 59470 Kuala Lumpur, Malaysia

Or email your application to: scholarship.my@fwd.com

SECTION A	PERSONAL DETAILS
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Name as per NRIC	:				
Residential Address	:				
	:				
House Tel. No.	:		Mobile No.	:	
NRIC	:		Email Address	:	
Nationality	:		Gender	:	
Date of Birth	:				

SECTION B	UNIVERSITIES AND FIELD OF STUDIES (PLEASE LIST YOUR TOP 3 CHOICE)
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NO	COURSES	UNIVERSITIES
1		
2		
3		

SECTION C
EDUCATIONAL QUALIFICATION / EXTRA CURRICULAR ACTIVITIES
Sijil Pelajaran Malaysia (SPM):

Name of School : _____

Year of Completion : _____ Final Grade : _____

Detailed Grade:

NO	SUBJECT	GRADE
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

NO	SUBJECT	GRADE
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Sijil Tinggi Pelajaran Malaysia (STPM):

Name of School : _____

Year of Completion : _____ Final Grade : _____

Detailed Grade:

NO	SUBJECT	GRADE
1		
2		
3		
4		
5		

NO	SUBJECT	GRADE
6		
7		
8		
9		
10		

Other Qualifications or Awards Received

NO	NAME OF QUALIFICATION OR AWARD RECEIVED	AWARDED BY	DATE OF AWARD
1			
2			
3			
4			
5			

Extra Curricular activities

NO	NAME OF SOCIETIES/CLUBS/SPORTS/OTHER ACTIVITIES	POSITION HELD	YEAR
1			
2			
3			
4			
5			

SECTION D	FAMILY AND INCOME DETAILS
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Legal Guardian, where applicable :

Father's Name :	Mother's Name :
Age :	Age :
NRIC No. :	NRIC No. :
Occupation :	Occupation :
Name of Employer :	Name of Employer :
Address of employer :	Address of employer :

Date Start :	Date Start :
Office Tel. No. :	Office Tel. No. :
Mobile No. :	Mobile No. :

SUMMARY OF INCOME

(Please attach relevant documents i.e. salary slip, statement of income, wherever applicable)

Family Members	Gross Income Per Month (RM)
1. Legal Guardian, where applicable	
2. Father	
3. Mother	
4. Applicant	
Other sources of income e.g. rental, etc. (please specify)	
1.	
2.	
3.	
TOTAL	

Other information: Please tick at the appropriate box and provide the information accordingly

- 1 Current residence: Owned, fully paid Rented: Monthly rental, RM _____
 Owned, under mortgaged: Monthly instalment: RM _____
- 2 Type of Residence (Please specify) : _____ e.g. bungalow/semi-D/terrace/condominium/flat etc.
- 3 Do your parents/legal guardian own any lands/houses/shop lots or other immoveable assets Yes No
 If yes, please state the type and estimated value: Type _____ Value: RM _____
- 4 Do your parents/legal guardian have any shares, unit trusts or other investment? Yes No
 If yes, please state the type and estimated value: Type _____ Value: RM _____
- 5 How many of your siblings (if any) contribute to household income? _____
- 6 Total monthly contribution from siblings is RM _____

NAMES AND PARTICULARS OF SIBLINGS

(Please use separate sheet if necessary)

No	Name	Age	Occupation/ Still studying	Name of employer/ School/ College/ Univ etc.	Recipient of scholarship from any organization, if any
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Do you have any relatives working in FWD Takaful? If Yes, please provide details: Yes () No ()

SECTION E

FINANCIAL ASSISTANCE

Are you presently receiving any financial assistance from any organizations/ institutions/foundations/ government bodies etc.? If yes, please provide details: Yes () No ()

Have you applied for any other Scholarships / Grants / Education Loans etc.? If Yes, please provide details: Yes () No ()

SECTION F

SOURCE OF INFORMATION

How did you find out about the FWD Takaful Berhad Scholarship Programme? Please tick at the appropriate boxes.

Social Media:

Instagram

Facebook

Others:

FWD Takaful website

Friends

Family/Relatives

SECTION G	REFEREES
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Please provide names, addresses, occupations, and contact nos. of two (2) referees who are not related to you for us to contact as character references. Please ensure that you get the consent of the referees before disclosing their personal data to us.

Referee 1:

Name as per NRIC : _____

Residential Address : _____

:

:

:

House Tel. no : _____ Mobile No : _____

NRIC : _____ Email Address : _____

Referee 2:

Name as per NRIC : _____

Residential Address : _____

:

:

:

House Tel. no : _____ Mobile No : _____

NRIC : _____ Email Address : _____

Notice:

The personal data collected in this form will be used for purposes related to your scholarship application. These purposes include without limitation, to assess your eligibility leading to the selection for the scholarship programme, to conduct reference and background checks, and for verification of information. We will not disclose your personal data to any third party, whether located in or outside Malaysia, unless it is required for these purposes. Failure to provide the information requested for may influence the outcome of your application. By signing at the bottom of this form, you are consenting the processing of your personal data for the stated purposes.

It is FWD Takaful Berhad's policy to retain the personal data of unsuccessful applicants for a period of 12 months from the date of application. To access or correct your information, please write to Human Resources Department to the attention of Manager, Learning and Development (details of which are on the first page of this form) with your name, correspondence address, contact number and details of your request.

I, _____, NRIC: _____

do hereby certify that all information provided in this application are true and accurate to the best of my knowledge and have not withheld any material information which might influence the consideration of this application. I understand that any misrepresentation/ false declaration will result in cancellation or withdrawal of any scholarship awarded.

I also authorize any investigation of the above information for the purpose of verification. I confirm that I have obtained the consent of my parent(s), legal guardian(s), sibling(s), referee(s) and/or other third parties to disclose their personal data as requested in this form.

Applicant's signature

Date

SECTION H	CHECKLIST (✓)
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Completed application form	
Certified true copy of NRIC (both sides on A4 paper)	
Certified true copy of SPM or any higher education transcript	
Certified true copy of applicant's/parents'/guardian's most recent EA/BE forms/pay slips	
Tax return form / any proof of income	
Recent passport-sized color photograph	
Acceptance/ Offer letter from the Approved List of Colleges and Universities by FWD Takaful	

FWD Takaful Berhad accepts documents that are certified by any of the following individuals:

1. Grade A Government Officer
2. School Principal / Headmaster
3. Commissioner of Oath
4. “Ketua Kampung”
5. “Ahli Jawatankuasa Kemajuan dan Keselamatan Kampung”
6. The employer or authorized representative of the employer

SECTION I	FOR OFFICE USE ONLY
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Date application received and received by _____ :

Shortlisted for interview Yes No

Comments: