



Tun Dr. Mahathir



## SCHOLARSHIPS

The Tun Dr. Mahathir UPM-ELS Malaysia Awards Scheme is now open to all Malaysian fresh graduates of SPM level or higher.

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### CONDITIONS AND PROCEDURES FOR APPLICATION

#### CONDITIONS FOR APPLICATION

- a) Only Malaysian citizens are eligible to apply
- b) This scholarship is intended for graduates of SPM level or higher
- c) A scholarship holder must accept to be enrolled as a full-time candidate in the Certified Intensive English Programme at ELS for a minimum of 4 months (1 semester / 16 weeks)
- d) A scholarship holder must participate in research surveys and studies performed by UPM
- e) A scholarship holder must take up the scholarship in the semester for which it is offered

#### PROCEDURE FOR APPLICATION

Please read the following instructions carefully before filling the form:

1. All applications must be made on the official scholarship application forms of ELS Language Centres. Completed forms should be sent by mail to:  
**The Tun Dr. Mahathir UPM-ELS Scholarship Committee**  
ELS Language Centres Management Office  
Suite C-10-01, Plaza Mont Kiara,  
No. 2, Jalan Kiara, Mont Kiara,  
50480, Kuala Lumpur
2. Applicants must enclose certified copies of the following documents:
  - a. SPM and/or STPM transcript(s)
  - b. University transcript(s) (if applicable)
  - c. Identity card
  - d. Testimonials and/or reference letters (optional)

**Please note that all documents submitted will not be returned to applicants regardless of the outcome of their applications. Incomplete applications will be disqualified.**

**Only shortlisted candidates will be notified for an interview. It is important for applicants to give their telephone contact to enable ELS Language Centres to call them for an interview if shortlisted.**



# APPLICATION FORM

## Tun Dr. Mahathir UPM-ELS Malaysia Awards Scheme

### INSTRUCTIONS

Please read the following instructions carefully before filling the form.

1. Please type or write clearly. Please use BLOCK LETTERS.
2. Type or write your name in full as it appears in your NRIC and underline your surname.
3. If space is insufficient, please continue in a separate sheet and attach the sheet to the application form.
4. Certified copies of relevant documents must be attached. (Please see Conditions and Procedure for Application attached).
5. For further enquiries, please call 03-62033532.
6. Completed application forms should be sent

to: **The Tun Dr. Mahathir UPM-ELS Scholarship Committee**  
 ELS Language Centres Management Office  
 Suite C-10-01, Plaza Mont Kiara,  
 No. 2, Jalan Kiara, Mont Kiara,  
 50480, Kuala Lumpur

|          |   |                |             |
|----------|---|----------------|-------------|
| <b>A</b> | Name of applicant as in NRIC<br>(Mr/Miss/Mrs/Madam) |                | NRIC number |
|          | Home Address (Permanent)                            | Postal Address |             |
|          | Home telephone no.                                  | Handphone no.  |             |
|          | Email address                                       |                |             |
|          | Date of birth                                       | Age            | Nationality |

|          |                                       |   |   |
|----------|---------------------------------------|---|---|
| <b>B</b> | Parent/Guardian's name                |   |   |
|          | NRIC number                           | Age                                     |   |
|          | Address                               |   |   |
|          | Home phone no.                        | Hand phone no.                          | Office Telephone No.                    |
|          | Occupation                            | Full-time work <input type="checkbox"/> | Part-time work <input type="checkbox"/> |
|          | Gross household income per month (RM) |   |   |

| C<br>Schools/colleges/universities attended by applicant,<br>also state name of town, city | Year<br>commenced | Year<br>completed | Qualifications<br>obtained |
|--|-------------------|-------------------|----------------------------|
|  |                   |                   |                            |
|  |                   |                   |                            |
|  |                   |                   |                            |
|  |                   |                   |                            |
|  |                   |                   |                            |
|  |                   |                   |                            |

| D<br>Activities in school/college/university and leadership positions held |
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| Prizes/awards won such as academic/subject prizes, trophies, medals for sports/other competition in school/college/university |
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|--|--------------------------------|
| Have you previously applied to the Tun Dr Mahathir UPM-ELS Scholarship? Yes <input type="checkbox"/> No <input type="checkbox"/>   |                                |
| If yes, state date of application and our reference number, if any   |                                |
| Name of two referees to whom reference may be made. Referees named should have known the applicant for a period of not less than 3 years. Referees can be relatives or close family friends. Referee should not be your own parents, brothers/sisters or fellow students. Referees should be contactable by telephone during office hours. |                                |
| Name (Mr./ Miss / Mrs./ Madam)   | Name (Mr./ Miss / Mrs./ Madam) |
| Address  | Address                        |
| Home phone no.   | Home phone no.                 |
| Office phone no.   | Office phone no.               |
| Occupation   | Occupation                     |
| No of years known  | No of years known              |
| Relationship to applicant  | Relationship to applicant      |

I hereby declare that the information given in this form is true to the best of my knowledge and that I have not wilfully suppressed any material fact relevant to this application.

\_\_\_\_\_

Date of application

\_\_\_\_\_

Applicant's signature

**DOCUMENTS CHECKLIST**

Please arrange your documents according to the order below. Please tick ( ✓ ) either 'Yes' or 'No'. If 'No', please explain why under 'Remarks'.

|                                 | Yes                      | No                       | Remarks |
|---------------------------------|--------------------------|--------------------------|---------|
| 1. Identity Card                | <input type="checkbox"/> | <input type="checkbox"/> | _____   |
| 2. SPM/STPM (Actual/Forecast)   | <input type="checkbox"/> | <input type="checkbox"/> | _____   |
| 3. University (Actual/Forecast) | <input type="checkbox"/> | <input type="checkbox"/> | _____   |
| 4. References/Testimonials      | <input type="checkbox"/> | <input type="checkbox"/> | _____   |

