

INTERNATIONAL STUDENTS APPLICATION FORM

STUDENT NUMBER (For office use)

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PHOTO

1 passport-size
or soft copy of
3.5cm x 4.5cm
with white
background

NAME OF APPLICANT		
INTAKE	Month	Year
PREFERRED LOCATION	<input type="checkbox"/> Damansara Heights Campus <input type="checkbox"/> Subang Bestari Campus	

Please tick (✓) programme(s) applying for:

HELP ACADEMY (HA)

UNIVERSITY OF DERBY 3+0 PROGRAMMES

- ☐ Bachelor of Arts (Hons) Accounting & Finance
- ☐ Bachelor of Arts (Hons) Business Management
- ☐ Bachelor of Arts (Hons) Business Management (International Business)

DEPARTMENT OF MANAGEMENT STUDIES

- ☐ Certificate in Business Management

HELP UNIVERSITY (HU)

FACULTY OF UNIVERSITY FOUNDATION STUDIES

- ☐ Foundation in Arts
- ☐ Foundation in Science

FACULTY OF COMMUNICATION, MEDIA AND CREATIVE INDUSTRIES

- ☐ Diploma in Communication
- ☐ Bachelor of Communication (Media Studies) (Hons)
- ☐ Bachelor of Communication (Marketing Communication) (Hons)
- ☐ Bachelor of Communication (Public Relations) (Hons)

FACULTY OF BUSINESS, ECONOMICS AND ACCOUNTING

- ☐ Diploma in Business
- ☐ Bachelor in Accounting (Honours)
- ☐ Bachelor of Business (Finance) (Honours)
- ☐ Bachelor in Marketing (Honours)
- ☐ Bachelor of Business Psychology (Hons)
- ☐ Bachelor of Business (Entrepreneurship) (Honours)
- ☐ Bachelor in International Business (Honours)
- ☐ Bachelor of Business (Human Resource Management) (Honours)
- ☐ Bachelor of Business Analytics (Honours)
- ☐ Bachelor of Management (Honours)
- ☐ Bachelor of Economics (Honours)

SCHOOL OF HOSPITALITY AND TOURISM

- ☐ Bachelor of Business (Hospitality Management) (Hons)
- ☐ Bachelor of Tourism Management (Honours)

FACULTY OF LAW AND GOVERNMENT

- ☐ Bachelor of Laws (Honours)
- ☐ UK Degree Transfer Programme (Law)

FACULTY OF COMPUTING AND DIGITAL TECHNOLOGY

- ☐ Diploma in Information Technology
- ☐ Bachelor of Information Technology (Honours)
- ☐ Bachelor of Information Technology (Data Analytics) (Honours)
- ☐ Bachelor of Computer Science (Honours)

FACULTY OF BEHAVIORAL SCIENCES

- ☐ Bachelor of Psychology (Honours)

DEPARTMENT OF EDUCATION

- ☐ Diploma in Education
- ☐ Diploma in Early Childhood Education
- ☐ Bachelor of Early Childhood Education (Honours)

DEPARTMENT OF ENGLISH

- ☐ MUET Preparatory Course (MPC)

☐ Others:

Have you made any previous applications to the HELP Group? ☐ NO ☐ YES, please specify:

How did you know about HELP and its programmes? Please specify:

Were you previously a registered student at any other educational institution in Malaysia? ☐ NO ☐ YES
If yes, specify name of institution and year(s)

If you are an expatriate domiciled in the present country, please specify your nationality

A | DETAILS OF APPLICANT Please use BLOCK LETTERS and underline surname

FULL NAME (as in PASSPORT)			
AGE	DATE OF BIRTH	COUNTRY OF BIRTH	NATIONALITY
MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married		GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
PASSPORT NO.			VALIDITY
PERMANENT ADDRESS (Home Country Address)			
POSTCODE / ZIP CODE	CITY	STATE / PROVINCE	COUNTRY
TEL. NO. (MOBILE)		TEL. NO. (HOME)	
CORRESPONDENCE ADDRESS IN MALAYSIA			
TEL. NO. (MOBILE)		TEL. NO. (HOME)	
POSTCODE / ZIP CODE		EMAIL	
Do you have any medical condition(s) or disability/disabilities that require(s) special assistance? <input type="checkbox"/> NO <input type="checkbox"/> YES If yes, please specify			

PLEASE NAME THE LOCATION OF THE NEAREST MALAYSIAN EMBASSY / HIGH COMMISSION / CONSULATE FOR YOUR STUDENT ENTRY VISA APPLICATION:

Note: Malaysian RM150 is the standard (about USD37.50) will be charged for any subsequent change of embassy / high commission / consulate after this application has been submitted.

YOUR OWN COUNTRY Name of Country City	NEIGHBOURING COUNTRY (if there is none in your country) Name of Country City
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B | DETAILS OF PARENTS, GUARDIAN OR NEXT OF KIN Please use BLOCK LETTERS and underline surname

1. NAME OF FATHER / GUARDIAN (as in PASSPORT)			
CORRESPONDENCE ADDRESS (if different from permanent address in Section A)			
POSTCODE / ZIP CODE	CITY	STATE / PROVINCE	COUNTRY
TEL. NO. (MOBILE)		TEL. NO. (HOME)	
EMAIL			
2. NAME OF MOTHER / GUARDIAN (as in PASSPORT)			
TEL. NO. (MOBILE)		TEL. NO. (HOME)	

C | ACADEMIC QUALIFICATIONS

Please state ALL the relevant academic qualification(s) that you hold (Enclose all relevant documents to support your qualifications)

NAME OF COURSE	NAME OF INSTITUTION	YEAR

ENGLISH LANGUAGE ACHIEVEMENTS ☐ TOEFL, level _____ ☐ IELTS, band _____ ☐ Others, please specify _____

D | DECLARATION

1. I certify that the information given herein is true and correct, and I acknowledge that any false and/or incorrect information or documentary evidence may result in the cancellation of my enrolment in the programme of study.
2. I understand that the offer letter issued to me will become void if I fail to submit all the relevant documents and pay the required course fees by the due date.
3. I agree to inform the Registrar in writing of any change in the information given herein, and I understand that HELP will not be held liable as a result of my failure to do so.
4. I understand and agree that HELP shall forfeit the security deposit paid by me if I remain inactive for one year without notifying the Registrar in writing.
5. I understand and agree that HELP shall cancel my student visa and notify the relevant government agencies/bodies if I remain inactive for one year without notifying the Registrar in writing.
6. I understand and agree that any fees, deposits and/or monies due to me that remain unclaimed for a period of one year or more from the date of my becoming inactive in my program of study, will be transferred to any nominated education or charitable fund without further reference to me.
7. I understand and agree to use the technology resources and facilities at HELP for educational, academic research and study purposes only, and HELP shall not be held liable for any violation of rules and regulations relating to those resources perpetuated by me.
8. I hereby agree and authorise HELP to release my personal information given herein to any authorised agencies and/or bodies of HELP or its business partners for the purpose of enrolment, educational evaluation, transfer of courses and any other administrative process; and to any relevant government bodies/agencies for enforcement of the law.
9. I authorise and grant HELP the right to use my personal information such as name, credentials, academic record, image, and spoken and written records of my activities at HELP, in posters, leaflets, brochures, advertisements, websites, films, electronic recordings and the like for the marketing and promotion of HELP's corporate image and programs of study, and/or any purposes incidental to it.
10. I understand and agree that HELP shall release my examination results and my academic record to my parents and/or sponsor(s) as and when it is deemed necessary.
11. I understand and agree to comply with all policies, rules and regulations of HELP, including the rules and regulations of the respective departments, during my programme of study at HELP.
12. I hereby declare that I have read and understood all the terms herein and agree to abide by them, if I am issued an offer letter to pursue the course I have applied for and I accept the same.

Applicant's Signature	Applicant's Name	Date
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Note:

1. All sections must be completed including the necessary signature(s) in the relevant sections.
2. Attach a set of certified copies of all academic qualifications, Health Declaration Form, photograph (3.5cm x 4.5cm with white background) and 1 photocopy of Passport (all pages, A4 size coloured).
3. Copies of documents and photographs submitted will be filed for our record purposes and will not be returned, even if the applicant decides not to continue with his/her application after submission. All information and documents given will be kept in confidence and in accordance with the Personal Data Protection Act 2010.
4. Enclose the non-refundable application fee made payable to either HELP University Sdn Bhd, or HELP Academy Sdn Bhd as the case may be.
5. Failure to comply with these procedures may result in a delay in processing this application.

E | ACCOMMODATION

<input type="checkbox"/> Required <input type="checkbox"/> Not Required	If you require accommodation, please complete the Student Accommodation Application Form and submit it together with this Application
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F | DECLARATION BY PARENT / GUARDIAN / SPONSOR IF THE APPLICANT IS BELOW 18 YEARS OF AGE

I, _____ hereby undertake to guarantee the good conduct of the applicant (student's name _____, reference no. _____) while he / she is studying at HELP University / HELP Academy. I also agree to pay all fees by the due date to the institution on his / her behalf in accordance with the regulations of HELP University / HELP Academy.		
Signature of Parent / Guardian / Sponsor	Relationship	Date

FOR OFFICE USE ONLY

EDUCATION ADVISOR Please print name in BLOCK LETTERS		APPLICATION RECEIVED BY	
Date		Date	
Application approved by: HOD / Authorised Staff Name and Signature		<input type="checkbox"/> Firm Offer <input type="checkbox"/> Conditional Offer - Forecast Results <input type="checkbox"/> Conditional Offer - see comments <input type="checkbox"/> Rejection / Reject Letter	
Date in:	Date out:		
Comments			
English requirement: <input type="checkbox"/> Yes <input type="checkbox"/> No		Comments	
TO BE COMPLETED BY RECRUITING AGENT			
Name of Recruiting Agent		The offer letter and the Visa Approval Letter (VAL) should be emailed to	

HELP UNIVERSITY SDN BHD

Company Registration Number: 198201005211(84963-D) | MoHE Approval Number: DU028(W)

ELM Business School

No. 15, Jalan Sri Semantan 1, Off Jalan Semantan, Bukit Damansara, 50490 Kuala Lumpur. Tel: +6012-928 0864

Subang Bestari Campus

Persiaran Cakerawala, Subang Bestari, Seksyen U4, 40150 Shah Alam, Selangor. Tel: +6012-928 0864

HELP ACADEMY SDN BHD

Company Registration Number: 200501018088 (700201-H) | MoHE Approval Number: DK341(W)

ELM Business School (Level 9)

No.15, Jalan Sri Semantan 1, Off Jalan Semantan, Bukit Damansara, 50490 Kuala Lumpur. Tel: +012-928 0864