STUDENT NUMBER (For	office use)
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# INTERNATIONAL STUDENTS APPLICATION FORM





#### PH0T0

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

NAME OF APPLICANT					
INTAKE	Month		Year		
PREFERRED LOCATION	☐ Damansara Heights Campu	IS	☐ Subang Bestari Cam	pus	
Please tick(√)programme(s)	applying for:				
HELP ACADEMY (HA)					
DEPARTMENT OF MANAGEMENT					
HELP UNIVERSITY (HU)					
FACULTY OF UNIVERSITY FOUNDATION STUDIES  Foundation in Arts Foundation in Science		FACULTY OF LAW AND GOVERNMENT  ☐ Bachelor of Laws (Honours) ☐ UK Degree Transfer Programme (Law)			
FACULTY OF COMMUNICATION, MEDIA AND CREATIVE INDUSTRIES  Diploma in Communication  Bachelor in Communication (Media Studies) (Hons)  Bachelor of Communication (Marketing Communication) (Hons)  Bachelor of Communication (Public Relations) (Hons)		FACULTY OF COMPUTING AND DIGITAL TECHNOLOGY  Diploma in Information Technology  Bachelor of Information Technology (Honours)  Bachelor in Information Technology (Data Analytics) (Honours)  Bachelor of Computer Science (Honours)			
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)		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)			
<ul> <li>□ Bachelor of Business Analytics (Honours)</li> <li>□ Bachelor of Management (Honours)</li> <li>□ Bachelor of Economics (Honours)</li> </ul>		☐ Others:			
SCHOOL OF HOSPITALITY AND TO Bachelor in Hospitality Man Bachelor of Tourism Manag					
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) **DATE OF BIRTH COUNTRY OF BIRTH NATIONALITY AGE MARITAL STATUS GENDER** ☐ Single ☐ Married 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? ☐ NO ☐ 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 **NEIGHBOURING COUNTRY** (if there is none in your country) Name of Country Name of Country City City 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 OUALIFICATIONS

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. Lagree to inform the Registrar in writing of any change in the information given herein, and Lunderstand 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

## 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						
☐ Required ☐ Not Required	If you require accommodation, please complete the Student Accommodation Application Form and submit it together with this Application					
F   DECLARATION BY PARENT / GUARI	DIAN / SPONSOR	RIFT	HE APPLICANT IS BE	ELOW 18 YEARS	S OF AGE	
l,		here	by undertake to guar	antee the good	conduct of the applicant	
	, reference no) while he / she					
is studying at HELP University / HELP A						
behalf in accordance with the regulatio	ns of HELP Unive	rsity	/ HELP Academy.			
Signature of Parent / Guardian / Sponsor		Rela	tionship		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				☐ Firm Offer ☐ Conditional Offer - Forecast Resul ☐ Conditional Offer - see comments ☐ Rejection / Reject Letter		
Date in:	Date out:			- Rejection/ Reject Letter		
Comments						
English requirement: ☐ Yes ☐ No	Comments					
TO BE COMPLETED BY RECRUITING AG	ENT					
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