

# ELM GRADUATE SCHOOL APPLICATION FORM

Student number (For office use)

|  |  |  |  |  |  |  |  |
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|--|--|--|--|--|--|--|--|



Name of Applicant

Application Date

Intake  
(month / year of planned  
course commencement)

## PHOTO

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

Please tick (✓) in box against course OR write name of course if not listed below)

| BUSINESS / MANAGEMENT                                            | PSYCHOLOGY                                                                                                    |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Doctor of Business Administration       | <input type="checkbox"/> Master of Clinical Psychology                                                        |
| <input type="checkbox"/> Doctor of Philosophy                    | <input type="checkbox"/> Master in Counselling                                                                |
| <input type="checkbox"/> Doctor of Philosophy (ODL)              | <input type="checkbox"/> Master of Philosophy (Psychology)                                                    |
| <input type="checkbox"/> Master of Business Administration       | <input type="checkbox"/> Doctor of Philosophy (Psychology)                                                    |
| <input type="checkbox"/> Master of Business Administration (ODL) | <b>CRIMINOLOGY &amp; CRIMINAL JUSTICE</b>                                                                     |
| <input type="checkbox"/> Master of Corporate Governance          | <input type="checkbox"/> MSc in Economic Crime Management                                                     |
| <input type="checkbox"/> Master of Project Management            | <b>EDUCATION</b>                                                                                              |
| <input type="checkbox"/> Master of Human Resource Development    | <input type="checkbox"/> Master of Education (Teaching and Learning)                                          |
| <input type="checkbox"/> Master of Philosophy                    | <input type="checkbox"/> Master of Education (Teaching and Learning) (ODL)                                    |
| <input type="checkbox"/> Master of Entrepreneurship              | <input type="checkbox"/> Doctor of Philosophy in Education                                                    |
| <input type="checkbox"/> Master of Accounting and Finance        | <b>COMMUNICATION, MEDIA AND CREATIVE INDUSTRIES</b>                                                           |
| <b>COMPUTING &amp; DIGITAL TECHNOLOGY</b>                        | <input type="checkbox"/> Master in Communication and Creative Industries (ODL)                                |
| <input type="checkbox"/> Doctor of Philosophy (ODL)              | <b>LAW AND GOVERNMENT</b>                                                                                     |
| <input type="checkbox"/> Master in Artificial Intelligence       | <input type="checkbox"/> Master of Cyber Law (ODL)                                                            |
| <input type="checkbox"/> Master in Artificial Intelligence (ODL) | <b>FUTURE TECHNOLOGY &amp; DESIGN</b><br>(Offered under the HU-HUT Institute of Future Technology and Design) |
| <input type="checkbox"/> Master in Cybersecurity (ODL)           | <input type="checkbox"/> Master of Philosophy                                                                 |
| <input type="checkbox"/> Master of Data Science                  | <input type="checkbox"/> Doctor of Philosophy                                                                 |

HELP University values your decision to pursue your course of choice. The Admissions Committee will consider applications on the basis of the applicant's academic, professional and other qualifications, in terms of the admissions policy.

HELP University will issue a letter of course admission to successful applicants, normally within seven (7) working days. Please note that your course commencement and

progression is subject to settlement of applicable course fees and other requirements stated in the course admission letter.

Our mission is to help people succeed in life and live a life of significance through education. We are confident candidates will find the learning and networking experience interesting and invaluable for their career advancement and personal enhancement.

Have you made any previous applications to the HELP Group? ☐ NO ☐ YES

Please specify:

|  |
|--|
|  |
|--|

How did you know about HELP and its postgraduate programmes?

Please specify:

|  |
|--|
|  |
|--|

Were you previously a registered student at any other educational institution in Malaysia? ☐ NO ☐ YES

If yes, please specify year(s):

|  |
|--|
|  |
|--|

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

|  |
|--|
|  |
|--|

If you have previously held or are holding a Malaysian student visa, please provide details on an attachment

**SECTION A: PERSONAL INFORMATION** (Please provide legal name as in national ID/passport)

|                                                                                                 |                |                  |                                                                                                |
|-------------------------------------------------------------------------------------------------|----------------|------------------|------------------------------------------------------------------------------------------------|
| First Name(s) (As in National ID/Passport)                                                      |                |                  | 1 passport-size<br>or soft copy of<br>(3.5 cm X 4.5 cm)<br>photograph with<br>white background |
| Surname/Family Name                                                                             |                |                  |                                                                                                |
| Nationality                                                                                     | Race           | NRIC/Passport No |                                                                                                |
| Date of Birth dd/mm/yy                                                                          | Place of Birth |                  |                                                                                                |
| Gender <input type="checkbox"/> Male <input type="checkbox"/> Female                            | Marital Status |                  |                                                                                                |
| Correspondence Address                                                                          |                |                  |                                                                                                |
| City                                                                                            |                | Country          | Postcode                                                                                       |
| Tel No                                                                                          |                | Mobile Tel No    |                                                                                                |
| Fax No                                                                                          |                | Email address    |                                                                                                |
| Business/Home/ Permanent address                                                                |                |                  |                                                                                                |
| City                                                                                            |                | Country          | Postcode                                                                                       |
| Tel No                                                                                          |                | Mobile Tel No    |                                                                                                |
| Fax No                                                                                          |                | Email address    |                                                                                                |
| Person to contact in event of emergency Name, contact information and relationship to applicant |                |                  |                                                                                                |

Do you have any medical condition(s) or disability 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 (about USD42) will be charged for any subsequent change of embassy/high commission/consulate after this application has been submitted.)

Your own Country

Country \_\_\_\_\_

City \_\_\_\_\_

Neighbouring Country (if there is none in your country)

Country \_\_\_\_\_

City \_\_\_\_\_

**TO BE COMPLETED BY RECRUITING AGENT**

Name of Recruiting Agent

The offer letter and the Visa Approval Letter (VAL) should be emailed to

The offer letter and the Visa Approval Letter (VAL) should be posted to

**PLEASE UPDATE ELM GRADUATE SCHOOL IMMEDIATELY OF ANY CHANGES TO THE ABOVE INFORMATION**

**SECTION B: ACADEMIC AND PROFESSIONAL QUALIFICATIONS AND CAREER HISTORY**

If space is not sufficient, please use an attachment.

**TERTIARY EDUCATION**

| Academic Institution | Award (Name of degree/diploma, etc.) | Date of conferment of award |
|----------------------|--------------------------------------|-----------------------------|
|                      |                                      |                             |
|                      |                                      |                             |
|                      |                                      |                             |

**PROFESSIONAL AND OTHER QUALIFICATIONS**

| Professional Body / Institution | Qualification | Membership / Admission Date |
|---------------------------------|---------------|-----------------------------|
|                                 |               |                             |
|                                 |               |                             |
|                                 |               |                             |

**CAREER**

CURRENT OCCUPATION-EMPLOYER (Appointment Date / Nature of Business)

Responsibilities and Duties

**PREVIOUS EMPLOYMENTS**

| Organisation /<br>Nature of Business | Position / Duration | Roles and Responsibilities | Dates (Month/Year) |
|--------------------------------------|---------------------|----------------------------|--------------------|
|                                      |                     |                            |                    |
|                                      |                     |                            |                    |
|                                      |                     |                            |                    |
|                                      |                     |                            |                    |

**SECTION C: APPLICATION FOR CREDIT TRANSFER (EXEMPTION) ☐ NO ☐ YES**

Please mark ✓ in appropriate box above. Applicants who wish to apply for credit transfer for the course based on previous qualifications should submit relevant documentation such as the award certificate, transcripts, course syllabus and assessment method.

Exemptions are normally only granted on the basis of qualification at postgraduate level. A fee is chargeable for each credit transfer granted.

Details of Credit Transfer Application

**SECTION D: OTHER INFORMATION, IF ANY**

## SECTION E: STATEMENT OF PURPOSE AND APPLICANT'S DECLARATION

Please explain why you wish to pursue the course and how the learning experience and qualification are likely to benefit you in your career and personal development. Please use an attachment, if necessary.

I, \_\_\_\_\_ (applicant's name), hereby submit my application for admission into the course as stated in this form, together with the application fee payable to **HELP UNIVERSITY SDN BHD**.

| FOR MALAYSIAN APPLICATIONS                        | FOR INTERNATIONAL APPLICATIONS                                                                                                                                                         |
|---------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RHB Bank Berhad<br>Account No.: 2143-3435-0034-32 | HSBC Bank Malaysia Berhad<br>Level 1, Annexe Menara Millennium, Jalan Damanlela,<br>Pusat Bandar Damansara, 50490 Kuala Lumpur<br>Account No.: 359 010 303 101<br>Swift Code: HBMBMYKL |

I declare that the information given is true and correct, and that, on course commencement and progression, I shall comply with all the governing conditions, and rules and regulations of HELP University. I acknowledge that any false or misleading information given may result in the non-acceptance of my application or my exclusion from the course and the university. I authorise HELP University to obtain evidence from any third party as is necessary for confirmation of the information that I have provided for the purpose of this application.

I nominate the following individuals who agree to provide references in support of my application:

| Name of Referee                                                    | 1 | 2 |
|--------------------------------------------------------------------|---|---|
| Position and Organisation                                          |   |   |
| Contact Information<br>Addresses, Tel. No.,<br>E-mail Address, etc |   |   |

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

### THIS SECTION FOR OFFICE USE ONLY

|                                                 |                                |
|-------------------------------------------------|--------------------------------|
| Education Advisor                               | Course Admission Letter Issued |
| Course Admission Approved By Name and Signature | Processed By                   |
| Date / Comments                                 | Date                           |

For more information and enquiries \_\_\_\_\_

**ELM Graduate School | Institute of Criminology and Criminal Justice**  
No. 5, Jalan Sri Semantan 1, Bukit Damansara, 50490, Kuala Lumpur, Malaysia  
**Department of Psychology | Faculty of Computing and Digital Technology**  
**Department of Education**  
2, Persiaran Cakerawala, Seksyen U4, 40150, Shah Alam, Selangor, Malaysia

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