

Tick [✓] where applicable 请在有兴趣的课程[✓] 打钩

- [] Electronic Equipment 电子设备
 [] Electrical Installation & Maintenance 机电装置与维修
 [] Aesthetic Services 美容服务
 [] Hairdressing 美发课程
 [] Bakery 烘焙
 [] Furniture Technology Certification Course 家具制造工艺证书

Affix Passport Size Photo

* PLEASE USE BLOCK LETTERS

Intake applied for: Year 20 Month of Intake

Student ID: -

SECTION 1 : PERSONAL INFORMATION 个人资料

Name: _____ (as in IC) Age: _____ 年龄

NRIC: E-mail: _____ 电邮地址

Mailing Address: _____ 通讯地址

Contact No.: (Handphone) _____ (Home) _____ 联络号码 手机电话 住家电话

SECTION 2: ACADEMIC QUALIFICATION 学历

Please list all School / College / Qualifications that you have taken. 请选择您的学历资格和列出您所读的学校/学院

Qualification(s) 学历	Year 年份	School Name 学校	Result 成绩
PMR 中三评估考试			
SPM 马来西亚教育文凭			
Others: _____			

SECTION 3 : PARENT / GUARDIAN QUALIFICATION 家长/ 监护人资料

Father/Guardian's Name: _____ (as in IC / Passport) NRIC: _____ 身份证号码 Occupation: _____ 职业

Contact No.: (Handphone) _____ (Home) _____ E-mail: _____ 联络号码 手机电话 住家电话 电邮地址

Mother's Name: _____ (as in IC / Passport) NRIC: _____ 身份证号码 Occupation: _____ 职业

Contact No.: (Handphone) _____ (Home) _____ E-mail: _____ 联络号码 手机电话 住家电话 电邮地址

Mailing Address: _____ 通讯地址

SECTION 4: EMERGENCY CONTACT 紧急联络

1) In case of emergency, to contact 若有急事, 就联络:

Person 1: Name 姓名: _____ Relationship 关系: _____

Contact No: (Handphone 手机电话) _____ (Home 住家电话) _____

Person 2: Name 姓名: _____ Relationship 关系: _____

Contact No: (Handphone 手机电话) _____ (Home 住家电话) _____

- 2) Do you have any disability / serious illness which requires our attention? 你有否残疾/疾病? [] Yes 是 [] No 否
3) If yes, please indicate type of disability / serious illness 如果有的话, 请注明残疾/疾病: _____

SECTION 5: PRELIMINARY INFORMATION 初步资料 Tick [√] where applicable 请在合适的地方[√] 打钩

How did you know about us? 如何知道本学院?

- [] Advertisement 广告 _____ [] Education Fair 教育展 _____
[] Banner / Leaflet 布条/传单 [] Telemarketing 电话行销 [] Others 其它 _____
[] Friends / Introducer - Name: _____ & _____
朋友/介绍人-姓名 (For KI student only) (Student ID)

SECTION 6: FINANCIAL ASSISTANCE / LOAN 贷学金 Tick [√] where applicable 请在合适的地方[√] 打钩

Do you need financial assistance? 您需要贷学金吗? [] Yes 需要 [] No 不需要

Family Income 家庭收入: _____

SECTION 7: PARENT'S & STUDENT'S DECLARATION 家长及学生声明

I hereby declare that the information provided and documents submitted in connection with this application are true and correct. I fully understand that: 本人谨此声明, 所提供的资料和提交的文件是真实及正确。我完全明白:

1. All fees are non refundable except for the deposit. 所有的学费恕不退还除了定金。
2. I must abide by and comply with all the rules, regulations and instructions of VTAR Institute. 我同意遵守拉曼技职学院所有的规则、规章和指示。
3. VTAR Institute reserves the right to change the Institute's policies, programmes and fees at its discretion without prior notice. 拉曼技职学院有权修改学院的政策、方案和费用, 并无须在事先通知。

Registration Checklist

(Tick [√] to confirm all the required documents have been attached 请在 [√] 打钩以确保有关文件已呈交)

- [] 1 certified copy of all relevant academic qualifications / examinations 一张有关学历资格 / 考试文凭副本
[] 1 copy of School Leaving Certificate 一张毕业证书副本
[] 1 copy of Identity Card 一张身份证副本
[] 4 passport size photos 四张护照尺寸照片

Please return your completed application form with payment of Registration fees, Refundable Deposit and the above required documents to VTAR Institute 请将已填写完整的报名表连同报名费、定金及有关文件一起交到拉曼技职学院:

VTAR INSTITUTE

Off Jalan Malinja, Taman Bunga Raya, 53000 Kuala Lumpur (TAR UC – Gate 4).

Tel No: 603-4149 8211 Fax: 603-4149 7211

Website: www.vtar.edu.my E-mail: enquiry@vtar.edu.my

Applicant's Signature 申请人签名

Parent/Guardian's Signature 家长/监护人签名*

Name 姓名:

Date 日期:

Name 姓名:

Date 日期:

* Parent / Guardian's signature is required if the applicant is below 18 years old. 如申请人年龄 18 岁以下, 必须有家长/监护人的签名。

SECTION 8: FOR OFFICE USE ONLY (办公室填写)

Remark: _____

Counselled / Enrolled by: Name: _____ Signature: _____ Date: _____

Admission processed by: Name: _____ Signature: _____ Date: _____