



A • P • U
ASIA PACIFIC UNIVERSITY
OF TECHNOLOGY & INNOVATION

POSTGRADUATE APPLICATION FORM

Please complete and return this form to:

Asia Pacific University of Technology & Innovation (APU) DUO30(W)

11, Jalan Teknologi 5, Technology Park Malaysia, Bukit Jalil, 57000 Kuala Lumpur.

Tel: +603-8996 1000 Email: info@apu.edu.my

☐ Malaysian ☐ International Country

For office use only

Student ID Intake Code

Counselor

PART A: PERSONAL DETAILS

Title: ☐ Mr ☐ Ms ☐ Mrs Others Gender: ☐ Male ☐ Female

Name (as per IC / Passport):

Marital Status: ☐ Married ☐ Single

IC Number / Passport Number:

Date of Birth (dd/mm/yyyy):

- -

Place of Birth (City / State):

Nationality:

Race:

Religion:

Student's Correspondence Address:

Postcode:

City / State:

Country:

Contact / Mobile (with Country code):

Email (please write clearly):

Parent / Guardian Name:

Relationship to the Student:

Contact / Mobile (with Country code):

Parent / Guardian Permanent Address (If different from Student's Correspondence Address):

Postcode:

Country:

Parent / Guardian Email (please write clearly):

Contact Person in Case of Emergency:

Relationship to the Student:

Contact / Mobile (with Country code):

Email (please write clearly):

PART B: COURSE APPLIED FOR

Course Name:

Specialism (if applicable):

Intake Date (mm/yy):

/

Level of Study: ☐ Master Degree ☐ DBA ☐ PhD ☐ PGD ☐ PGC

Mode of Study: ☐ Full-time ☐ Part-time

☐ ODL - 100% Online

PART C: ACADEMIC BACKGROUND (from highest to lowest)

Please list in chronological order all secondary and tertiary studies completed. Please attach copies of your certificates and the transcripts of all results obtained for your highest level of study, plus a certified translation if the originals are not in English.

Qualification:

Name of School / College / University:

Year Completed:

Result: CGPA

Language of Instruction

PART D: CAREER HISTORY / VOLUNTARY WORK / RELEVANT EXPERIENCE

Please give details of your last TWO (2) situations relating to employment, training and / or professional experience (most recent first)

| Name of Employers & Address | Position Held & Main Functions | Full-time/ Part-time | Period of Employment | | Reason for Leaving |
|-----------------------------|--------------------------------|-------------------------|----------------------|----------------------|----------------------|
| | | | From | To | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

PART E: MEDICAL DISCLOSURE

1. Do you have any special / medical condition that requires the attention of the University? ☐ Yes (please indicate below) ☐ No

☐ Allergies ☐ Anemia ☐ Asthma ☐ Colour Blindness ☐ Epilepsy ☐ Heart Disease ☐ Others _____

2. Have you had any history of Mental/ Psychiatric conditions? ☐ Yes (kindly specify your medical conditions below) ☐ No

3. Have you been diagnosed with any conditions/ disorders that may affect your ability to cope with University studies? ☐ Yes ☐ No

Note (for International Students Only):

- It is compulsory for all international students to purchase a health care plan and keep it valid throughout your academic study at APU. This will need to be purchased from EMGS.
- Students from Yellow Fever Endemic Zones and other affected areas are required to have an International Health Certificate showing Yellow Fever Vaccination.

PART F: REFEREES

Please provide TWO (2) academic references from people (not a relative) who have direct knowledge of your study and/ or work.

| Name | Position | Contact Number | Email |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

PART G TO PART H: FOR INTERNATIONAL APPLICANTS ONLY

PART G: ENGLISH LANGUAGE PROFICIENCY

English was the language of instruction in my previous completed studies Yes ☐ No ☐

I hold / have completed the English language qualification (s) listed below:

| Name of Test / Examination: | Name of Centre / Institution : | Date (to be) Taken: | Results (if known): |
|-----------------------------|--------------------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

PART H: MALAYSIAN IMMIGRATION INFORMATION

Are you currently holding any type of Malaysian Immigration Pass/ Visa? ☐ Yes ☐ No

If yes, type of Immigration Pass / Visa:

☐ Social Visit ☐ Student ☐ Dependent ☐ Diplomatic ☐ MM2H ☐ Resident Pass

Expiry date if Immigration Pass / Visa held (dd/mm/yyyy):

PART I: ACCOMMODATION ARRANGEMENTS

Do you require APU to arrange your accommodation? ☐ Yes (please fill up the APU Residence Application Form) ☐ No, I will arrange for my own accommodation

PART J: CONDITIONS FOR ENROLMENT

- Fees for the academic year are as stated in the fee guide.
- Payment by crossed cheque or bank transfer is to be made payable to **ASIA PACIFIC UNIVERSITY SDN BHD** or by bank transfer.
- Fee payment refunds are governed by the Fee Refund Policy as stated in the Fee Guide.
- Students must abide by all academic, administrative and examination rules and regulations and policies at APU.
- APU reserves the right to use your personal information in order to carry out its responsibilities in your personal and/ or academic interest as a student of APU.

PART K: IMPORTANT CHECKLIST

Malaysian Applicants

- ☐ Attached certified academic certificates & transcripts
- ☐ Attached Resume / CV
- ☐ Attached photocopy of IC
- ☐ Passport-sized photographs with WHITE background (35mm x 45mm)
- ☐ Enrolment Fee

International Applicants

- ☐ Copy of all pages of passport including blank pages (Please ensure the copies are clearly copied and all page number can be seen clearly)
- ☐ Attached certified academic certificates & transcripts (if the documents are not in English Language, please provide certified English translations)
- ☐ Attached Resume / CV
- ☐ Passport-sized photographs with WHITE background (35mm x 45mm)
- ☐ Health Declaration Form
- ☐ Pre-Arrival Application Processing Fee

PART L: DECLARATION

- I declare that all the particulars provided in this form are complete and correct. I understand that should any information in this form be found to be inaccurate/ incomplete my registration may be terminated by the University.
- I agree to abide by APU's Professional Code of Conduct, rules, regulations and policies.
- I hereby agree to give consent to APU to release my academic reports / results and attendance reports to my parents / guardians / sponsors as part of the APU's policies.
- I have also read and understood APU's FEE REFUND POLICY which is stated in the Fee Guide.
- I hereby confirm that the documents I have submitted are genuine and authentic. I fully acknowledge and understand that APU has the right to amend or reverse any decision with regard to my admission on the basis of incomplete, incorrect, fraudulent information or non-attainment of the minimum entry requirements to join a specific programme.
- I undertake to ensure that all fees are paid by the specified due dates, and failing which I agree to pay any late payment and/ or administrative charges incurred after the due dates. If the fees are not received within 21 days from the due date, I understand that I may not be allowed to use the facilities at APU.
- I hereby give permission to APU for the use of photographs, images and videos in publicity and promotional material and to release relevant information to our University Partners, Career Centre, Alumni and Government bodies or agencies as required.

Dengan ini saya memberi kebenaran kepada APU untuk kegunaan gambar, imej dan video dalam publisiti dan bahan promosi dan untuk memberikan maklumat yang relevan kepada institusi yang bekerjasama dengan Universiti kami, Pusat Kerjaya, Alumni dan mana-mana badan kerajaan atau agensi-agensi seperti yang dikehendaki.

Signature:

Name:

Date:

PART M: PRIVACY NOTICE

I have read the Privacy Notice (www.apu.edu.my) and consent to APU, APIIT, APIC processing my personal data in accordance with the Notice. I also hereby warrant that I have obtained the consent from third parties where I have provided their personal data and consent to any previous educational institution, current or past employer, sponsoring body providing information for the purpose of verifying my grades, qualifications, experience.

We may not be able to consider /process your application, or provide you with our services should you choose not to supply us with the necessary personal data, or the data supplied to us is insufficient and inaccurate. Saya telah membaca Notis Privasi (www.apu.edu.my) dan membenarkan APU, APIIT, APIC memproses data peribadi saya mengikut Notis tersebut. Saya juga dengan ini menjamin bahawa saya telah mendapatkan persetujuan daripada pihak ketiga di mana saya telah memberikan data peribadi mereka dan persetujuan kepada mana-mana institusi pendidikan terdahulu, majikan semasa atau terdahulu, badan penaja yang menyediakan maklumat untuk tujuan mengesahkan gred, kelayakan, pengalaman saya.

Kami mungkin tidak dapat mempertimbangkan/memproses permohonan anda, atau memberikan anda perkhidmatan kami sekiranya anda memilih untuk tidak membekalkan kami data peribadi yang diperlukan, atau data yang dibekalkan kepada kami tidak mencukupi dan tidak tepat.