

ECM LIBRA FOUNDATION (200401032679)(671187-W)

Application Form Study Loan Programme

This application form is divided into two (2) sections. Part I must be completed by the Applicant. Part II is to be completed by an academic referee who has personal knowledge of the Applicant's academic history. The completed Application Form must be posted/send by hand to: **ECM Libra Foundation**, **Grd Floor**, **Bangunan ECM Libra**, **No. 8 Jalan Damansara Endah**, **Damansara Heights**, **50490 Kuala Lumpur**.

Applicants are to ensure that certified true copies of supporting documents must be enclosed as specified per the Study Loan Checklist Form. Please note that your application **will be rejected** if you did not submit all the require documents. All applicants will be notified via email of your application status.

Your parents/sibling (as the case may be), as the co-borrowers of this loan and therefore will be jointly and/or severally liable for the loan if approved. If the parents have no income or are retired, then a sibling can be considered in lieu.

The Application Form must be completed LEGIBLY in neat hand writing. All details must be provided. If the space provided is insufficient, please use separate sheet(s) of paper and number it accordingly.

PARTI

| Personal Particu | | | | |
|----------------------|---------------|--------------|----------|------------------|
| Name: | | <i>)</i> | | |
| New NRIC No: | | | | |
| Date of Birth: | | | | |
| Gender: | Male | Female | | |
| Marital Status: | ☐ Single ☐ | Married | Divorced | Widowed |
| Permanent Address: | | | | |
| | | | | |
| Status of above hous | se: 🗌 Own | Rental | ☐ Others | (Please specify) |
| How long have you s | stayed in the | above hous | e: | _years |
| House Tel No: | | | | Mobile No: |
| Savings Account No | | | | Name of Bank: |
| E-mail Address: | | | | |



Course of Study

| Type of study loan applied for: | | | duate | | | |
|--------------------------------------|--|------------------------|---------------------|--------------|-------------|--|
| | | ☐ Diploma | | | | |
| | | Others | (Please specify | · | | |
| Unive | rsity/College/Institution gained admi | ssion to <i>(Pleas</i> | e attach Letter | of Admission | /Offer) | |
| Name of University/College: Address: | | | | | | |
| Cours | e applied/pursuing: | | | | | |
| Durati | on of Course: | | | | | |
| Course Fees: Per Annu | | ım (RM) | | Total (RM) | | |
| Date of Commencement of Course: | | | Date of Completion: | | | |
| Applie | ed for PTPTN loan? | No If | yes, Amount A | pproved (RM) | | |
| | demic Qualifications se provide certified copies of results, | /certificates) | | | | |
| | | | /Qualification | | | |
| No | Name of School/Institution | Atta | nined | Year | Grade/Score | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |

Extra-Curriculum Activities

(Please provide certified copies of certificates of achievements)

| No | Name of Uniformed Society or Activities participated | Name of School or Event | Achievement Attained |
|----|---|----------------------------|----------------------|
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| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 10 | | | |



Family Particulars

Employment Status:

Self-Employed

(Please submit ICs, payslips, latest income tax and EPF statements. If your parent(s) is/are retired, please provide copy of retirement letter and state the last position, salary before retirement and the date of retirement)

| Father's Name: | | | | | | IC No: | |
|-----------------------------------|------------------|-----------|-----------------|-----------|--------------|-------------------------|--|
| Address: | | | | | | Tel (Hse): | |
| (if different from the applicant) | | | | | | HP No: | |
| Occup | oation: | | | | | Annual Income: | |
| Emplo | oyer: | | | | | Email: | |
| Mothe | er's Name | | | | | IC No: | |
| Occup | oation: | | | | | HP No: | |
| Emplo | oyer: | | | | | Annual Income: | |
| | | | | | | Email: | |
| Partic | culars of Siblin | as | | | | | |
| <u>r artic</u> | Jararo or Olomi | <u>30</u> | | | | | |
| No | Name | | Gender | Age | Occupation | Name of Employer/School | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 7 | | | | | | | |
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| 9 | | | | | | | |
| 10 | | | | | | | |
| | | | | | | | |
| <u>Parti</u> | culars of Sp | ouse (if | <u>Applican</u> | t is marr | <u>ried)</u> | | |
| Name | : | | | | | | |
| IC No | .: | | | | Dat | e of Birth: | |
| | | | | | | No: | |
| Cooupanon. | | HP No: | | | | | |
| Employer: | | | | | Anr | nual Income: | |
| Gende | Gender: | | | | | | |

☐ Under Employment



Particulars of Guarantor

Please note your parents cannot be your guarantor. Your guarantor must be:

- 1. Below 50 years old (please enclose a copy of his/her IC)
- 2. Earning a min monthly income of RM3000 and above (please enclose pay slip n the latest EPF & income tax statement)

| Name: | | IC No: | |
|-------------------------------------|------------|--------------------------------------|--|
| Permanent Address: | | Tel (Hse): | |
| | | HP No: | |
| status of above house: Own Renta | al Others | | |
| Email: | | Annual Income: | |
| Savings Account No: | | | |
| Employment Status: Self-Employed | ☐ Under Em | ployment | |
| Name of Employer/Company: Address: | | | |
| | | | |
| Office Tel No: | | Fax No: | |
| Designation: | | Years of Service: | |
| Marital Status: Single Married | Divorced | Widowed | |
| Particulars of Spouse | | | |
| Name: | | IC No: | |
| Occupation: | | HP No: | |
| Employer: | | Annual Income: | |
| Email: | | | |
| Particulars of Children | | _ | |
| No Name | Age N | lame of School/Occupation if working | |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| Relationship with Applicant: | | | |



| (continue on a separate sheet, if required) |
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| 100 words or more, state why you choose this course of study and why you believe you are suited for it. |
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| |
| Varning: Please write your original answer without resorting to any artifcial intelligence assistance |



PART II

To be completed by Academic Referee

| Name: | | | | Designation: | |
|---------------------------------------|---------------------|-----------------------|--------------------|----------------------|--------------|
| Institution/Employe | r: | | | No of Years: | |
| Email: Address: | | | | Tal· | |
| 1. How long have y | ou known the Ap | plicant? | years | months | ; |
| 2. How would you i | rate the Applicant | t's academic record | d and ability? (Pl | ease check one) | |
| ☐ Outstanding | Excellent | ☐ Very Good | Good | ☐ Average | Poor |
| 3. In your opinion, lin the same coul | | ate the Applicant's o | current academic | standing against oth | ner students |
| ☐ Top 10% | 20 - 30% | ☐ 40 - 50% | ☐ 50% & below | | |
| candidate's stren | gth and suitability | / . | | ve a brief comment o | |
| 5. Additional Comi | | | | · | |
| | | | | | |
| | | | | | |
| I hereby confi belief. | rm that the above | e information is true | e and accurate to | the best of my know | rledge and |
| Signature: | | New NR | RIC: | Da | ate: |



Declaration by Applicant & Guarantor:

I hereby declare that:

- 1 All the information given in this Application Form and all the documents submitted are complete, true and correct. I authorise the Foundation to verify the information from whatsoever sources and by whatever means that the Foundation deems appropriate.
- 2 I understand that the Foundation:

(For Applicant): reserves the right to forfeit my eligibility for the study loan or revoke any study loan approval granted to me or recall any study loan granted to me in the event that:

(For Guarantor): reserves the right to revoke the study loan approval granted to the Applicant or recall any study loan agreement to the Applicant in the event that:

- a) any of the information, statement or fact disclosed in this Application Form is false or incorrect; or
- b) if there is any misrepresentation of information, statement or fact in this Application Form; or
- c) if any of the documents submitted in support of this application is falsified or forged.
- 3 I have never been made a bankrupt and there are no threatened, pending or existing bankruptcy proceedings commenced against me.
- 4 I do not have any criminal record.
- I understand and accept that the Foundation reserves the right and has the absolute discretion to approve or reject my application without assigning any reason whatsoever and I accept all decisions by the Foundation as final and conclusive.
- 6 The Foundation shall not be held responsible for any loss or delay in respect to this application.
- 7 I have not applied for nor a recipient of any other financial assistance from any other Foundation/Corporate/ Government Agencies.
- 8 I have enclosed all the required documents as per the Checklist Form.

| Signat | ure of Applicant | Date | | |
|----------|------------------|----------|--|--|
| Name: | | | | |
| NRIC No: | | | | |
| | | | | |
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| | | | | |
| | <u></u> | <u>-</u> | | |
| Signati | ure of Guarantor | Date | | |
| Name: | | | | |
| NRIC No: | | | | |