

Photo

STUDENT PERSONAL DATA

(BORANG MAKLUMAT PELAJAR)

"By signing/ filling this application form, you agree that KPJ International College Penang & KPJ Healthcare University College may collect, use and disclose your personal data, as provided in this application form, Or obtained by our organisation as a result of your application, for the following purposes in accordance with the Personal Data Protection Act 2010 and our data protection Policy (available at our website <http://www.kpjuc.edu.my>)"

A. PROGRAMME AND FINANCING INFORMATION (For office use)

PROGRAMME NAME	
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B. PERSONAL INFORMATION (STUDENT) MAKLUMAT PERIBADI (PELAJAR)

FULL NAME (as in ID CARD / PASSPORT) <i>Nama penuh (seperti dalam kad pengenalan)</i>	
IC NUMBER / PASSPORT NUMBER <i>(Nombor kad pengenalan)</i>	
DATE OF BIRTH (Tarikh lahir)	
IC COLOUR (Warna IC – untuk warganegara sahaja)	
NATIONALITY (Kewarganegaraan)	
GENDER (Jantina)	
RACE (Bangsa)	
RELIGION (Agama)	
MARITAL STATUS (Status perkahwinan)	
NO. OF SIBLINGS (Bil. adik beradik termasuk anda)	
NO of DEPENDANT (including mother) <i>(Bil tanggungan , termasuk ibu)</i>	
CONTACT NO. (HOUSE) (Nombor telefon rumah)	
MOBILE NUMBER (Nombor telefon bimbit)	
E-MAIL ADDRESS (emel)	

FAMILY INCOME (Pendapatan isi rumah – semua yang bekerja)	<input type="checkbox"/> < 1,000 <input type="checkbox"/> 2,500 – 3,500 <input type="checkbox"/> 1,000 - 2,500 <input type="checkbox"/> > 3,500 - 5,000 <input type="checkbox"/> 5,000 and above
OKU STATUS (Status OKU)	<input type="checkbox"/> Yes <input type="checkbox"/> No
CURRENT MAILING ADDRESS (Alamat surat menyurat yang terkini)	
POSTCODE (Poskod)	
CITY (Bandar)	
STATE (Negeri)	

CO-CURRICULUM ACTIVITY (AKTIVITI KO-KURIKULUM)

NAME OF CO-CURRICULUM ACTIVITY (Nama aktiviti ko-kurikulum)	POSITION (Jawatan)	YEAR OF ACTIVITY (Tarikh aktiviti)

C. SPOUSE INFORMATION (IF MARRIED)
MAKLUMAT PERIBADI PASANGAN (SEKIRANYA BERKAHWIN)

FULL NAME (SAME AS ID CARD / PASSPORT) (Nama penuh (sama seperti dalam kad pengenalan / pasport))	
IC NUMBER / PASSPORT NUMBER (Nombor kad pengenalan / nombor pasport)	
NATIONALITY (Kewarganegaraan)	
PERMANENT ADDRESS (Alamat Tetap)	
MOBILE NUMBER (Nombor Telefon Bimbit)	
OCCUPATION (Pekerjaan)	

PARENTS PERSONAL INFORMATION

(MAKLUMAT PERIBADI IBU DAN BAPA)

FATHER (BAPA)

FULL NAME (SAME AS ID CARD / PASSPORT) <i>(Nama seperti dalam kad pengenalan / pasport)</i>	
IC NUMBER / PASSPORT NUMBER <i>(Nombor kad pengenalan / nombor pasport)</i>	
COLOUR <i>(Warna)</i>	
NATIONALITY <i>(Kewarganegaraan)</i>	
RACE <i>(Bangsa)</i>	
RELIGION <i>(Agama)</i>	
PERMANENT ADDRESS <i>(Alamat Tetap)</i>	
CONTACT NUMBER (HOUSE) <i>(Nombor Telefon Rumah)</i>	
MOBILE NUMBER <i>(Nombor Telefon Bimbit)</i>	
OCCUPATION <i>(Pekerjaan)</i>	
EMPLOYER'S ADDRESS <i>(Alamat Majikan)</i>	
TELEPHONE NO. (OFFICE) <i>(No Telefon (Pejabat))</i>	
FAX NUMBER <i>(No. Faks)</i>	

MOTHER (IBU)

FULL NAME (SAME AS ID CARD / PASSPORT) <i>(Nama seperti dalam kad pengenalan / pasport)</i>	
IC NUMBER / PASSPORT NUMBER <i>(Nombor kad pengenalan / nombor pasport)</i>	
COLOUR <i>(Warna)</i>	
NATIONALITY <i>(Kewarganegaraan)</i>	
RACE <i>(Bangsa)</i>	
RELIGION <i>(Agama)</i>	
PERMANENT ADDRESS <i>(Alamat Tetap)</i>	
CONTACT NUMBER (HOUSE) <i>(Nombor Telefon Rumah)</i>	
MOBILE NUMBER <i>(Nombor Telefon Bimbit)</i>	
OCCUPATION <i>(Pekerjaan)</i>	
EMPLOYER'S ADDRESS <i>(Alamat Majikan)</i>	
TELEPHONE NO. (OFFICE) <i>(No Telefon (Pejabat))</i>	
FAX NUMBER <i>(No. Faks)</i>	

D. EMERGENCY CONTACT
MAKLUMAT PERIBADI – SELAIN IBU BAPA (KECEMASAN)

FULL NAME (SAME AS ID CARD / PASSPORT) <i>(Nama penuh (sama seperti dalam kad pengenalan / pasport))</i>	
RELATIONSHIP <i>(Hubungan dengan pelajar)</i>	
PERMANENT ADDRESS <i>(Alamat Tetap)</i>	
MOBILE NUMBER <i>(Nombor Telefon Bimbit)</i>	
TELEPHONE NO. (OFFICE) <i>(No Telefon (Pejabat))</i>	
FAX NUMBER <i>(No. Fax)</i>	

I CERTIFY THAT THE INFORMATION PROVIDED IN THE FORM IS CORRECT AND COMPLETE. I ACKNOWLEDGE THAT THE SUBMISSION OF INCORRECT OR INCOMPLETE INFORMATION MAY RESULT IN TERMINATED OF ADMISSION AT ANY STAGE DURING THE COURSE AT KPJ HEALTHCARE UNIVERSITY COLLEGE.

Saya mengaku bahawa segala maklumat yang diberikan di dalam borang ini adalah betul dan tepat. Saya mengakui juga bahawa sekiranya terdapat sebarang maklumat palsu atau tidak lengkap boleh menyebabkan saya diberhentikan daripada meneruskan pengajian di Kolej KPJ.

STUDENT SIGNATURE :

Tandatangan pelajar

DATE :

Tarikh

IMPORTANT NOTE :

YOU ARE REQUIRED TO INFORM THE DEPARTMENT FOR ANY CHANGES.