



APPLICATION FORM

APPLICANT INFORMATION

Name of Training/ Course:

Applicant's Name:

Age:

NRIC:

Phone:

Current address:

City:

State:

Postcode:

EMPLOYMENT INFORMATION

Current employer:

Employer address:

Designation:

Phone:

E-mail:

Fax:

City:

State:

Postcode:

REFERENCES

Name

Relationship:

Phone

SPONSOR'S INFORMATION

Sponsor: Self-Sponsored Company Sponsored

Company Name:

Person In Charge:

Telephone No.:

Payment Method:

Signature of Sponsor:

Company Official Stamp:

Date:

SIGNATURES

Signature of applicant:

Date:

IMPORTANT

1. Please make sure cheque are paid in the name of "AKAUN PUNGUTAN MICET". AKAUN PUNGUTAN MICET account number: 800 441 8735 (CIMB BANK BERHAD).
2. Please send complete form to ACE SECTION, UNIVERSITI KUALA LUMPUR, LOT 1988 KAWASAN PERINDUSTRIAN BANDAR VENDOR, TABOH NANING, 78000 MELAKA or email to ace.micet@unikl.edu.my