

### 1. APPLICATION CHECKLIST Please include the following items where applicable

<input type="checkbox"/>	Photocopy identity card or 1st & Visa page of passport (Color)	<input type="checkbox"/>	Job offer letter from employer
<input type="checkbox"/>	2 pcs passport pictures	<input type="checkbox"/>	Permission letter from employer
<input type="checkbox"/>	Certified copies of academic qualifications	<input type="checkbox"/>	Accreditation letter (MKPK) - For office use only

### 2. APPLICATION CHECKLIST Please mark (X) where applicable.

#### FACULTY OF INFORMATION TECHNOLOGY

<input type="checkbox"/>	Bachelor of Science (Hons) in Software Engineering with Multimedia
<input type="checkbox"/>	Bachelor of Science (Hons) in Information Technology
<input type="checkbox"/>	Foundation in Information Technology
<input type="checkbox"/>	HNTEC in Information Technology
<input type="checkbox"/>	HNTEC in Computer Networking
<input type="checkbox"/>	NTec in Information Technology

#### FACULTY OF BUSINESS

<input type="checkbox"/>	Bachelor of Business (Hons) in Accounting
<input type="checkbox"/>	Bachelor of Business Administration(Hons)
<input type="checkbox"/>	Foundation in Business
<input type="checkbox"/>	UTB BriBUS Program - Business
<input type="checkbox"/>	HNTEC in Business (Office Administration)
<input type="checkbox"/>	NTec in Business Management

#### FACULTY OF ART & HUMANITY

<input type="checkbox"/>	Bachelor of Design (Hons) in Professional Design (Visual Communication)
<input type="checkbox"/>	Foundation in Design
<input type="checkbox"/>	Diploma in Graphic Design Technology
<input type="checkbox"/>	Certificate in Art & Design

#### FACULTY OF MULTIMEDIA AND BROADCASTING

<input type="checkbox"/>	Bachelor of Communication (Hons) in Digital Media
<input type="checkbox"/>	Diploma in Animation & Multimedia Design
<input type="checkbox"/>	Diploma in Multimedia, Advertising & Broadcasting
<input type="checkbox"/>	Certificate in Electronic Media Production (Radio & TV)

#### FACULTY OF ENGINEERING TECHNOLOGY

<input type="checkbox"/>	HNTEC in Construction & Draughting (Dual TVET)
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#### FACULTY OF GENERAL STUDIES

<input type="checkbox"/>	UTB Bri-IComm Program - Communication
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Mode of study	Intake
<input type="checkbox"/> Day	<input type="checkbox"/> March
<input type="checkbox"/> Evening	<input type="checkbox"/> April
	<input type="checkbox"/> October

#### How did you find out about us?

<input type="checkbox"/>	Newspaper Advertising
<input type="checkbox"/>	Borneo Buletin
<input type="checkbox"/>	Walk-in Inquiry
<input type="checkbox"/>	Friends & Family
<input type="checkbox"/>	Kolej IGS Open Day
<input type="checkbox"/>	Education Fair / Expo
<input type="checkbox"/>	Social Media (Instagram, etc)
<input type="checkbox"/>	Others (Please describe)

### 3. PERSONAL INFORMATION Please complete in BLOCK LETTERS

APPLICANT'S FULL NAME (as per local identity card or passport)																							
Identity Card/Passport No.												ID Colour :											
Date of Birth (DD/MM/YYYY)												Gender		<input type="checkbox"/> Male		<input type="checkbox"/> Female		Marital Status		<input type="checkbox"/> Single		<input type="checkbox"/> Married	
Nationality		Race:				Religion:				Personal Email:													
Occupation		Company Name:																					
Position		Department:																					
Current Address																							
		Mobile No.										Home No.											
Office Address																							
		Office No.										Office Email											
Permanant Address (If different from Current Address)																							
		Home No.																					

**3. PARENT / GUARDIAN INFORMATION** Please complete in BLOCK LETTERS

<b>FATHER'S FULL NAME</b> (as per local identity card or passport)																													
Identity Card/Passport No.																				ID Colour :									
Date of Birth (DD/MM/YYYY)		/		/																				Personal Email:					
Nationality		Race:						Religion:																					
Occupation												Company Name:																	
Office Address																													
Mobile No.												Home No.																	
<b>MOTHER'S FULL NAME</b> or Guardian (as per local identity card or passport)																													
Identity Card/Passport No.																				ID Colour :									
Date of Birth (DD/MM/YYYY)		/		/																				Personal Email:					
Nationality		Race:						Religion:																					
Occupation												Company Name:																	
Office Address																													
Mobile No.												Home No.																	

**4. ACADEMIC AND/OR PROFESSIONAL QUALIFICATIONS** Please complete in BLOCK LETTERS where applicable

Academic level (state below)	Programme name																			Year					
	Institute name																			CGPA / Class / Grade					
Academic level (state below)	Programme name																			Year					
	Institute name																			CGPA / Class / Grade					
Other academic or professional qualifications	Programme name																			Year					
	Institute name																			CGPA / Class / Grade					
<input type="checkbox"/> GCE A-levels		<input type="checkbox"/> English		<input type="checkbox"/> Maths																				<input type="checkbox"/> GCE O-levels	

**5. MEDICAL / HEALTH DECLARATION** Please state medical issues / situations that the college administration has to be aware of.

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**6. FEE PAYMENT METHOD / FINANCIAL AID** Please mark (X) where applicable.

<input type="checkbox"/> Self-financed	<input type="checkbox"/> Government scholarship	Other scholarship (name of organisation & details)
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**7. DECLARATION**

I declare that all information given in this form and the documents attached are valid. I understand that giving false information would result in rejection of my application. With this, I hereby agree for Kolej IGS to check my qualifications whenever necessary. I also confirm that I have the original copies of the certificates and be able to produce them when requested.

Applicant's signature	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	Parent's / Guardian's signature
Name		Name
Date (DD/MM/YYYY)		

**8. FOR OFFICE USE ONLY**

Application accepted	<input type="checkbox"/> Full Offer	<input type="checkbox"/> Conditional	Counceled by
Semester admitted	<input type="checkbox"/> Year 1 (Semester 1)	<input type="checkbox"/> Year 2 (Semester 3)	
Conditions			
Exemptions			
<input type="checkbox"/> Issue Offer Letter for April Intake <input type="checkbox"/> Issue Offer Letter for September Intake		Registrar's Endorsement	Head of Faculty's Endorsement
Date		Date	Date