

Program :

Application ID Number:

APPLICATION FOR ADMISSION

How to complete the form

1. Please write in BLOCK LETTERS and BLACK INK only.
2. Attach a certified true copy of actual results High School Certificate / SPM.
3. Passport size colour photograph – 2 copies
4. Other supporting document for your application (where necessary).

Programme Applied:

Certificate
 Foundation
 Diploma
 Degree
 Master
 Ph.D
 Others:

Please affix a passport – size photograph

A: PERSONAL DETAILS

Applicant's Name: _____

Sex : Male Female Date of Birth:

Nationality : _____ IC / Passport No. :

Marital Status : Single Married Others : _____

Permanent Address: _____

Postcode: _____

City: _____ State: _____ Country: _____

Tel (House) : _____ Tel (Mobile) : _____ Email: _____

Correspondence Address: _____

City: _____ State: _____ Postcode: _____

Tel (House) : _____ Tel (Mobile) : _____ Email: _____

Father's / *Guardian Name: _____ Father's / *Guardian's Occupation: _____

Mother's / *Guardian Name: _____ Mother's / *Guardian's Occupation: _____

*Relationship with Guardian: _____

Permanent Address of Guardian: _____

Postcode: _____

City: _____ State: _____ Country: _____

Tel (House) : _____ Tel (Mobile) : _____ Email: _____

B. ACADEMIC QUALIFICATIONS

Education School, College, University (Please provide documentary evidence)

Duration		FT or PT	School, College, University	Course studied with details of major studied and class of honors (if applicable)	Completed Yes / No
From YY	To YY				

YY – Year FT – Full Time PT – Part Time

C. APPLICANT’S DECLARATION

I wish to be considered for admission to LINCOLN UNIVERSITY COLLEGE program, and I declare that to the best of my knowledge the information in this application and the documentation supporting it is correct and complete. I acknowledge that the provision of false or misleading information may result in non-acceptance of this application or immediate expulsion from the program. I authorize LINCOLN UNIVERSITY COLLEGE where necessary to obtain from any other educational institution evidence of my academic record or to seek other corroborating evidence with respect to my application. I also declare that I have provided certified copies of the documents indicated in the checklist.

Signature of Applicant _____

Date: ____/____/____

OFFICE USE ONLY

Payment Details

Amount : RM _____ Chq/Draft/Cash

Receipt :

Received by :

Remarks :

Approved by (Registrar) :

SECTION 1 : PERSONAL INFORMATION

Name of Applicant : _____

Student ID No. : _____

Date of Birth : _____

NRIC/ Passport No. : _____

Gender : Male Female

Nationality : _____

Race : Malay Chinese

India Others:

Religion : Muslim Buddhist

Christian Hindu

Others:

Marital Status : Single Married

Address : _____

Postcode : _____ Town : _____

State : _____

Email Address : _____

Telephone No. : _____ Mobile No. : _____

SECTION 2 : PROGRAMME PREFERENCE

Intake : _____

Certificate Foundation Diploma Degree

Master Ph.D Others:

Programme : _____

DETAILS OF FAMILY MEMBERS	FATHER	MOTHER	GUARDIAN (if any)
Name			
Address			
Postcode			
Town			
State			
Occupation			
Salary			
Company Name			
Office No.			
Mobile No.			

EMERGENCY CONTACT DETAILS

Name : _____

Relationship : _____

Address : _____

Postcode : _____ Town : _____

Office No. : _____ Mobile No. : _____

SECTION 3 : INTERNATIONAL STUDENT ONLY

Are you holding any type of Malaysian Immigration Pass now? Yes No

If yes, please specify Social Visit Student Dependent Diplomatic

Immigration Pass Expiry Date: _____

Applicable to Students/ former students from other institution in Malaysia only

Institution : _____

Course : _____

Year / Duration : _____

Applicable to students from the People's Republic of China only

Please specify as to which Malaysian Consulate you wish to obtain your single entry

Visa to Malaysia? Shanghai Beijing Guangzhou

SECTION 4 : ACADEMIC QUALIFICATION

Please tick the box based on the academic qualification(s) that you possess and enclose all relevant documents. Please attach original or /and certified copies (with official signature or/ and stamp) of all transcripts provided by institutions you have listed below.

Applicant(s) who submit document(s) in a language other than English must provide an officially certified translation, together with the original.

Qualification:	<input type="checkbox"/>	SPM	Year Completed :	_____
	<input type="checkbox"/>	STPM	Year Completed:	_____
	<input type="checkbox"/>	O LEVEL	Year Completed:	_____
	<input type="checkbox"/>	A LEVEL	Year Completed:	_____
	<input type="checkbox"/>	Others:	Year Completed:	_____

No	Subject	Grade	No	Subject	Grade
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

CGPA / Grade :

Name of Course	Name of Institution & Country	Course Length (Start date & Completion date)	Major of Discipline	Class or Grade Awarded (e.g. Honor 2 nd upper or your GPA)

SECTION 5 : ENGLISH PROFICIENCY

Please provide relevant supportive documents.

Do you have English Language Qualification? Yes No

If yes, please specify :

	Score	Date	Reference No.
TOEFL			
IELTS			
LUC Language Test			

SECTION 6 : FINANCIAL ASSISTANCE

Sponsored by Employer
 Self Finance
 Scholarship
 Sponsored by Government
 PTPTN / MARA
 Others: _____

Please attach relevance supportive documents.

Company Name : _____
 Address : _____
 Postcode : _____ Town : _____
 State : _____ Country : _____
 Office No. : _____ Mobile No. : _____

SECTION 7 : DECLARATION BY APPLICANT

I, declare that the information given in this registration form is complete and accurate to the best of my knowledge. I understand that withholding information or/ and giving false information will make me ineligible for admission. I also understand that I may be required to attend for an interview or undergo such test that may be requested by the University College as a requirement for admission to the programme of study for which I have applied. I, further confirm and consent to the use by Lincoln University College's without charge, my personal information (including photographs or/ and images or/ and recordings of the student), in any publicity or / and promotional exercise of Lincoln University College's to release such relevant information to the relevant Alumni Association.

Name of Applicant:

NIRC / Passport No. :

Date _____ :

Signature of Applicant

OFFICE USE ONLY

Registration : Malaysian International
 Counseled by : _____ Date : _____
 Introduced by : _____
 Registration Fees paid : Yes No Date : _____
 Tuition Fees paid : Yes No Date : _____
 Documents Complete : Yes No Date : _____

Please fill up ALL sections of this form in CAPITAL LETTERS and duly signed it.
Enclose certified true copies of all required documents.

Registrar

Dean / Coordinator



ENROLMENT DECLARATION

To

Lincoln University College
Block A, Mayang Plaza
No. 1, Jalan SS 26/2
Taman Mayang Jaya
47301 Petaling Jaya
Selangor.

Dear Sir / Madam,

I hereby authorize Lincoln University College to obtain official records and other relevant information(s) with respect to myself from other appropriate educational institution(s). I approve the release of details of my course and grades at Lincoln University College to other educational institution(s) and academically relevant professional bodies. I authorize the University College to release formal details for educational purposes or to meet legal obligations or in the case of emergency, as authorized by the Registrar, in accordance with the University College's policy and procedures covering secrecy of student records.

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Name of Student :
NRIC No. / Passport No. :
Date :