

(Country code - area code - tel. no)

(Country code - mobile no)

Father's/*Guardian's Name

Father's/*Guardian's Occupation

Mother's/*Guardian's Name

Mother's/*Guardian's Occupation

*Relationship with Guardian

Permanent Address of Guardian

Postcode

City

State

Country

Tel. (House)

Tel. (Mobile)

Email

(Country code - area code - tel. no)

(Country code - mobile no)

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 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 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

Date

/ /

D. Checklist

(✓) Checklist for enclosure of documents:

Attach a certified true copy of actual/forecast results of High School Certificate/SPM/STPM/Diploma
 Certified copy of IC/International Passport – 2 copies
 2 copies passport-sized photograph
 Other supporting document for your application (where necessary)
 Admission fee of RM 500.00 (non-refundable). If by mail, payment must be made by
 Cheque/bank draft payable to **LINCOLN COLLEGE**
 Account No.: RHB BANK (DAMANSARA UTAMA) 2-12349-00022834 / SWIS Code RHBBMYKL

Office Use Only

Conditions of Enrolment

() Conditional Offer () Full Offer

Exemption (s):

Scholarship:

Enrolled By/Date:

Process by (Officer):

Approved by (Dir. of Operations):

Payment Details

Amount: RM Chq/ Draft/Cash

Receipt No.:

Received By:

Remarks:

Checked by (Registrar):

Approved by (Principal):