



Registered Trustees of the Joseph William Yee Eu Foundation

Registration No. PPAB-04/2010

1 Jalan 3/155, Bukit OUG, 58200 Kuala Lumpur, Malaysia

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## BURSARY APPLICATION FORM (BA2020-1)

The JWYE Foundation was incorporated in 1994 as part of the benevolent & charitable activities to encourage and foster academic advancement for needy and deserving students.

### CONDITIONS OF THE AWARD

- The Foundation is offering bursaries (up to RM8,000 each), to be awarded annually.
- The Applicant must be a Malaysian citizen and should have been accepted to a course at a local School, Vocational School, College and University.
- The award will be based on scholastic achievements as well as the financial needs of the applicant. Scholastic achievements will be based on previous year's academic results or last completed courses, whichever is applicable.
- The bursary will be tenable at any recognized local School, Vocational School, College and University and will be awarded to the candidate when evidence is made available of the candidate's full-time attendance at such educational institutions.
- The bursary is renewable for the remainder of the course program based on certification of a continuing good academic performance report received from the educational institution, and subject to terms and conditions where applicable.
- Applications must be filed with the JWYE Foundation on the prescribed form and addressed to:
  - JWYE Foundation, No. 1 Jalan 3/155, Bukit OUG, 58200 Kuala Lumpur
  - Email: [jwyefoundation@gmail.com](mailto:jwyefoundation@gmail.com)
- The award will be made only on application and acceptance over the signature of the candidate.
- All decisions of the Board of Trustees of JWYE Foundation are final.

### INSTRUCTIONS

Please read the following instructions carefully before filling the form.

1. State clearly in BLOCK letters.
2. Complete **ALL SECTIONS** of the application form (pages 2-5)
3. If space is insufficient, please continue in a separate sheet and attach to the application form.
4. Please submit application with all the documents (listed in page 2)

**\* Incomplete applications will not be processed.**

Please tick **✓** and attach **ALL DOCUMENTS** (a), (b) - (n) as certified true copies in the following order, to your Application Form:

| <b>NAME OF APPLICANT:</b>  | Checked by applicant | Checked by JWYEF |
|--|----------------------|------------------|
| a) A letter from you to the Chairman, Scholarship Committee, JWYE Foundation - about yourself and your current financial situation       |                      |                  |
| b) Reference Letter / Testimonial from main (1 <sup>st</sup> ) referee   |                      |                  |
| c) Identity Card (both sides)  |                      |                  |
| d) Birth Certificate   |                      |                  |
| e) Admission / Acceptance Letter from Vocational School / College/ Institution / University  |                      |                  |
| f) Calendar of Course Years / Semesters, available from your educational institution   |                      |                  |
| g) Schedule of Course Fees by academic year / semester, available from your educational institution                                      |                      |                  |
| h) Previous year's academic results, or last completed semester / term course <i>(if you are already midway in college / university)</i> |                      |                  |
| i) Parent / Guardian's latest Income Tax Statement or latest pay slip  |                      |                  |
| j) SPM / O-Level / STPM / A-Level / Diploma / other equivalent qualifications  |                      |                  |
| k) School leaving certificates and testimonials  |                      |                  |
| l) Other Scholarship, Bursary, Grant (if any) – letter of offer from organisation  |                      |                  |
| m) PTPTN or PTPK Loan (if any) – letter of offer from PTPTN or PTPK  |                      |                  |
| n) Others (if any) – please specify  |                      |                  |

| SECTION A: PERSONAL INFORMATION |               |                |  |
|---------------------------------|---------------|----------------|--|
| Name:<br>(as in I/C)            |               |                |  |
| I/C No:                         |               |                |  |
| Gender :                        | Male / Female | Date of Birth: |  |
| Address :                       |               |                |  |
| Tel No:                         |               | Mobile No:     |  |
| Email address:                  |               | Skype ID:      |  |

PLEASE  
AFFIX  
PHOTO

| SECTION B: COURSE TO BE UNDERTAKEN   |  |
|--|--|
| Name of School / Vocational School / College / Institution/University:                     |  |
| Course Name:   |  |
| Duration of course ( <i>total years / semesters</i> )                                      |  |
| Course Start & End Dates:  |  |
| Total Course Fees:   |  |
| Remaining Period of Course: (if midway)  |  |
| Amount required for remaining period of course:  |  |
| Other expenses (exclude course fees):<br>eg expenses for accommodation, travel, meals, etc |  |

| SECTION C: PTPN or PTPK LOAN / SCHOLARSHIPS / BURSARIES / GRANTS APPLIED FOR OR RECEIVED (if any) |        |
|---|--------|
| Name of Organisation  | Amount |
|   |        |
|   |        |
|   |        |

| SECTION D: ACADEMIC QUALIFICATIONS  | Qualifications | Year Completed |
|-------------------------------------|----------------|----------------|
| SPM / O-Level / equivalent          |                |                |
| STPM / A-Level / equivalent         |                |                |
| Diploma / equivalent                |                |                |
| OTHERS – e.g. last semester results |                |                |

| SECTION E: EXTRA-CURRICULAR ACTIVITIES   |      |               |
|--|------|---------------|
| INCLUDING MEMBERSHIPS OF SOCIETIES / ASSOCIATIONS / SPORTS / GAMES   | Year | Position Held |
|  |      |               |
|  |      |               |
|  |      |               |
| PRIZES / AWARDS WON SUCH AS ACADEMIC/SUBJECT/PRIZES, TROPHIES, MEDALS FOR SPORTS/OTHER COMPETITION ( <i>if any</i> ) |      | Year          |
|  |      |               |
|  |      |               |

| SECTION F: FAMILY BACKGROUND   |                         |              |                                       |                             |
|--|-------------------------|--------------|---------------------------------------|-----------------------------|
| <b>FATHER / GUARDIAN</b>   |                         |              | <b>MOTHER</b>                         |                             |
| Name:  | Age:                    | Name:        | Age:                                  |                             |
| Occupation:  | Gross salary per month: | Occupation:  | Gross salary per month:               |                             |
| Name of Employer:  |                         |              | Name of Employer:                     |                             |
| Additional Income per month (if any) :                                 |                         |              | Additional Income per month (if any): |                             |
| Total Income per month:  |                         |              | Total Income per month:               |                             |
| House <i>(delete whichever not applicable)</i> : Family Owned / Rented |                         |              |                                       |                             |
| <b>SIBLINGS WHO ARE WORKING (if any); indicate if married</b>          |                         |              |                                       |                             |
| Name   | Age                     | Gender M / F | Occupation                            | Monthly Income              |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
| <b>SIBLINGS WHO ARE CURRENTLY PURSUING THEIR EDUCATION (if any)</b>    |                         |              |                                       |                             |
| Name   | Age                     | Gender M / F | Name of School/Institution            | Source of Financial Support |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
| <b>OTHER DEPENDENTS (if any)</b>                                       |                         |              |                                       |                             |
| Name   | Age                     | Gender M / F | Relationship                          |                             |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |
|  |                         |              |                                       |                             |

| SECTION G: COMMUNITY CARE CENTRE / RESIDENTIAL HOME (if applicable) |            |                 |
|---|------------|-----------------|
| Name of Home / Centre:  |            |                 |
| Address:  |            |                 |
| Name of Coordinator/Chairperson/Supervisor/Leader:                  |            | Position/Title: |
| Tel No:   | Mobile No: |                 |
| Email :   |            |                 |

| SECTION H: 2 REFEREES (not related to applicant)                                  |             |
|---|-------------|
| * to include the person who referred applicant to JWYE Foundation ie main referee |             |
| Name: *   | Name:       |
| Address:  | Address:    |
| Occupation:   | Occupation: |
| Email:  | Email:      |
| Mobile No:  | Mobile No:  |

**Declaration by Applicant**

The information given above constitutes my representation to you whereby your judgment may be based. I acknowledge that JWYE Foundation reserves the right to seek from the relevant bodies verification as to the standing of my claimed situation. If at any time hereafter you were to find such information materially false/untrue or if there is any omission, you shall be at liberty to take such action against me including termination of any benefit granted to me and recovery of any benefit hitherto extended to me and all my costs thereby incurred shall be borne by me.

I undertake to complete the course of study with diligence and within minimum time, to report to you and to furnish you progress report/term results immediately upon their issuance to me and all receipts for payment of fees and incidental expenses.

I further understand that on receiving the bursary I will have to enter into normal publicity that goes with receiving such an award, e.g. national newspapers or newsletters.

I confirm that I have read all the terms and conditions in respect of this application and I hereby agree to be bound by the same.

Name.....

I/C No. ....

Signature.....

Date.....