



**ACADEMIC QUALIFICATIONS**

a) Certificates obtained : SPM/STPM/Matriculations, etc.

SPM/O'Level/ Equivalent	Year	STPM/A'Level/ Equivalent	Year	Other Qualification	Year
Subjects	Grade	Subjects	Grade	Subjects	Grade
<b>Grade / Aggregate</b>		<b>Grade / Aggregate</b>		<b>Grade / Aggregate</b>	

\*Please enclose certified copies of certificates.

**INFORMATION ON COURSE OF STUDY**

Name of University : \_\_\_\_\_ Qualifications : Diploma / Degree / Master \*  
 Discipline / Major : \_\_\_\_\_ Duration of Course : \_\_\_\_\_ years  
 Intake Date : month \_\_\_\_\_ year \_\_\_\_\_  
 Date of Completion : month \_\_\_\_\_ year \_\_\_\_\_  
 Cumulative Grade Point Average (CGPA) : \_\_\_\_\_ / 4.00 Scale  
 Grade Point Average (GPA) for: First Year 1st Semester: \_\_\_\_\_ 2nd Semester: \_\_\_\_\_  
 Second Year 1st Semester: \_\_\_\_\_ 2nd Semester: \_\_\_\_\_

**SCHOLARSHIP / ACHIEVEMENTS / PRIZES AWARDED**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

\* Please delete where not applicable

**MAIN INTERESTS AND CO-CURRICULAR ACTIVITIES**

Level of Participation	Membership of Societies / Clubs	Position Held and Responsibility

**LANGUAGE PROFICIENCY**

Please indicate your degree of fluency

Languages	Written			Spoken		
	Good	Fair	Bad	Good	Fair	Bad
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bahasa Malaysia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**HEALTH**

- (a) Height \_\_\_\_\_ cm                      (b) Weight \_\_\_\_\_ kg
- (c) Have you ever been involved with drugs? \_\_\_\_\_
- (d) Give details of any physical impairment, disease or serious illness that you suffer from now or have been afflicted with previously.  
 \_\_\_\_\_  
 \_\_\_\_\_
- (e) Have you ever been convicted in a Court of Law?  
 \_\_\_\_\_

**OTHER PARTICULARS**

- (a) Do you have any relatives working in Samsung Electronics Groups Malaysia (SDI, SCM, SDMA, SEMA, SME) ?  
 YES / NO \*
- (b) If YES, please state :  
 Name of relative : \_\_\_\_\_ Relationship : \_\_\_\_\_  
 Company : \_\_\_\_\_ Department : \_\_\_\_\_

\* Please delete where not applicable

**PARTICULARS OF FINANCIAL ASSISTANCE**

(a) Are you presently, or being processed in receipt of any scholarships, financial aid or award from other organization, educational institution and government?

YES / NO \*

(b) If yes, please state

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(c) Are you presently bonded to any scholarship sponsors?

YES / NO \*

(d) If yes, please state

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**REFREES**

Please give particulars of two persons (non-relatives) who know you well with regard to your character and academic performance.

(1) Name : \_\_\_\_\_ Occupation : \_\_\_\_\_  
Company : \_\_\_\_\_ Contact Number : \_\_\_\_\_  
Relationship : \_\_\_\_\_ Years known : \_\_\_\_\_

(2) Name : \_\_\_\_\_ Occupation : \_\_\_\_\_  
Company : \_\_\_\_\_ Contact Number : \_\_\_\_\_  
Relationship : \_\_\_\_\_ Years known : \_\_\_\_\_

**DECLARATION BY APPLICANT**

I declare that all particulars provided above are true to the best of my knowledge and that I have not suppressed any material fact. I understand that if any information in this Application Form and in the attached documents is found to be false or inaccurate, my application shall be rejected without prior notice; and whereby the scholarship has already been awarded to me, SAMSUNG shall have the discretion to withdraw the same.

I also undertake to furnish SAMSUNG with additional information or documents as and when required.

Signature of Applicant : \_\_\_\_\_  
Name of Applicant : \_\_\_\_\_ Date : \_\_\_\_\_

\* Please delete where not applicable