**SCHOLARSHIP CLAIM FORM**

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| --- |
| **Student Details** |
| Name: |  |
| IC No: |  | Staff / Student ID No: |  |
| Hand Phone No: |  | Email: |  |
| Course/Programme: |  | University: |  |
| Account No: |  | Bank Name: |  |
| **Claim Details** |
| Semester: |  | Start Date: |  | End Date: |  |
| Type of claim: *Please tick (√) where applicable* |
| Tuition Fees |  | Air – Ticket (Economy Class including 20kg Luggage) |  | Passport & Visa (Overseas – One time Only) |  |
| Total Amount Claim (RM):*Please attach relevant receipts* |  |
| Declaration: I declare that the information given in this claim form and its attachments is correct, true and complete and I know that it is an offence to make false claim. |
| Signature:  | Date: |
| **For Human Capital and Administration Department Use Only:** |
| *Checked & Verified by:* | *Recommended by:* |
|  |  |
| Name:Date: | Name:Date: |
| **For Bursary Office Use Only:** |
| *Verified by:* | *Approved by:* |
|  |  |
| Name:Date: | Name:Date: |