

**ASEAN Bright Sparks - Partial Academic / Leadership Scholarship
Application Form**

The Application Form must be completed legibly. All details must be provided. Your application will automatically be disqualified if you do not comply with any part or requirement of the application form.

Please submit your application by post or e-mail to:

By email: ***scholarships@ecmlibra.com***

By mail: ***ECM Libra Foundation ASEAN Scholarships, Ground Floor, 8 Jalan Damansara Endah, 50490, Kuala Lumpur, Malaysia.***

Please note that only short-listed candidates will be contacted.

Application deadline: All applications must be received at the address above or via e-mail by the 31st of July 2022 for the September 2022 intake.

PLEASE SELECT ENROLMENT YEAR

PART I : PERSONAL PARTICULARS

Full Name: _____
(Please underline surname)

IC / Passport No: _____ Nationality: _____

Date of Birth: _____

Gender: ☐ Male ☐ Female

Home Address:

Correspondence

Address:

House Tel No: _____ Mobile No: _____

E-mail Address:

Academic Results

(Please provide certified copies of academic results/certificates, including mock results)

No	Name of School/Institution	Examination/Qualification Attained	Year	Grade/Score
1				
2				
3				
4				
5				

Extra-Curriculum Activities

(Please provide certified copies of certificates of achievements, if any)

No	Name of Uniformed Society or Activities participated	Name of School or Event	Achievement Attained
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Family Particulars

Father's Name: _____ Age: _____

Address: _____ Tel (Hse): _____

_____ HP No: _____

Occupation: _____

Employer: _____

Email Address:
(if any)

Mother's Name:

Age:

Occupation:

HP No:

Employer:

Particulars of Siblings

No	Name	Gender	Age	Occupation	Name of Employer/School
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

END OF PART I

PART II : APPLICANT'S PERSONAL STATEMENT

In not more than 300 words, please write a personal statement on why you are applying for this scholarship and what your ambitions are.

PART III: Teacher Referrals

(Please submit at least one (1) teacher's referral letter)

Name of Teacher:	_____	Designation:	_____
School:	_____	No of Years:	_____
Email:	_____	Contact No:	_____
Address:	_____		

Name of Teacher:	_____	Designation:	_____
School:	_____	No of Years:	_____
Email:	_____	Contact No:	_____
Address:	_____		
	-		
	-		

Name of Teacher:	_____	Designation:	_____
School:	_____	No of Years:	_____
Email:	_____	Contact No:	_____
Address:	_____		

Name of Teacher:	_____	Designation:	_____
School:	_____	No of Years:	_____
Email:	_____	Contact No:	_____
Address:	_____		

Declaration by Applicant or Applicant's Parent / Legal Guardian (if Applicant is below 18)

I hereby declare that:

1. All the information given in this Application Form and all the documents submitted are complete, true and correct. I authorise the Foundation to verify the information from whatsoever sources and by whatever means that the Foundation deems appropriate.
2. I understand that the Foundation reserves the right to forfeit the applicant's eligibility for the Scholarship or revoke any Scholarship approval granted to the applicant or recall any Scholarship granted to the applicant in the event that:
 - a. any of the information, statement or fact disclosed in this Application Form is false or incorrect;
 - b. if there is any misrepresentation of information, statement or fact in this Application Form;
 - c. if any of the documents submitted in support of this application is falsified or forged.
3. The applicant does not have any criminal record. If the applicant does, it has been disclosed.
4. I understand and accept that the Foundation reserves the right and has the absolute discretion to approve or reject this application without assigning any reason whatsoever and I accept all decisions by the Foundation as final and conclusive.
5. The Foundation shall not be held responsible for any loss or delay in respect to this application.
6. The applicant is not a recipient of any other financial assistance from any other Foundation/Corporate/ Government Agencies.

Signature:

Name:

Date:

Scholarship Application Checklist

- 1 Please complete all sections of the Scholarship Application Form (comprising Parts I, II & III) ("Application Form"). Where the requested information is not applicable, please state "Not Applicable".
- 2 Use only BLOCK LETTERS and black ink for the Application Form. Illegible Application Forms will be rejected.
- 3 Incomplete Application Forms will also be rejected.
- 4 Applications submitted to the Foundation after the deadline will not be considered. The Foundation will not entertain any appeal to consider such applications.
- 5 Please tick (✓) beside the corresponding sections in the Checklist below to indicate the submission of all required documentation.

Checklist

- | | |
|---|--------------------------|
| 1. Completed Application Form (comprising of Parts I, II & III) | <input type="checkbox"/> |
| 2. Scan or copy of Applicant's Identity Card or Passport | <input type="checkbox"/> |
| 3. Scan or copy of Applicant's Parent's or Legal Guardian's Identity Card or Passport | <input type="checkbox"/> |
| 4. Applicant's School Leaving Certificate (if applicable) | <input type="checkbox"/> |
| 5. UPSR / PT3 / SPM / "O" Levels (or local equivalent) Results | <input type="checkbox"/> |
| 6. Extra Curricular Activities Report | <input type="checkbox"/> |
| 7. Passport Photo of Applicant | <input type="checkbox"/> |
| 8. Teacher's Recommendation (at least one) | <input type="checkbox"/> |
| 9. Any other relevant documents (please specify) | <input type="checkbox"/> |