

ADMISSION APPLICATION FORM (FOR MALAYSIAN ONLY)

Notice of Personal Data Protection Act / Notis Akta Perlindungan Data Peribadi

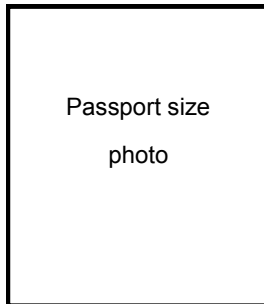
By completing this Application Form, I understand MIA is bound to give Notice and require consent in relation to processing of personal information, in accordance with the Personal Data Protection Act 2010 ["PDPA"]. I hereby confirm that I have read, understood, and agreed to the Personal Data Protection Notice at www.mia.edu.my.

Dengan melengkapkan borang permohonan kemasukan ini, saya faham bahawa MIA terikat untuk memberi notis dan memerlukan persetujuan berhubung dengan pemrosesan maklumat peribadi menurut Akta Perlindungan Data Peribadi 2010 ["PDPA"]. Saya mengesahkan bahawa saya telah membaca, memahami serta bersetuju dengan kenyataan Notis Perlindungan Data Peribadi di www.mia.edu.my.

Important Notice to Applicant & Parents / Guardian :

1. This application form is **SOLELY** for MIA's consideration for enrolment. Only successful applicants will be given the Official Offer Letter to enrol in MIA's programme.
2. Information provided in the form must be true and correct.
3. The applicant shall be required to obtain prior consent from his / her parents, guardian and/or emergency contacts for their personal information that is provided in this form.
4. In the case where the applicant and his / her parents / guardian **DO NOT** consent MIA to process their personal information, MIA will not be able to proceed further with his / her application form.

REFERENCE NO : _____
 (FOR OFFICE USE ONLY)



Choice of Diploma Programme

Programme	1st	2nd
Fine Art	<input type="checkbox"/>	<input type="checkbox"/>
Graphic Design	<input type="checkbox"/>	<input type="checkbox"/>
Interior Design	<input type="checkbox"/>	<input type="checkbox"/>
Illustration	<input type="checkbox"/>	<input type="checkbox"/>
Industrial Design	<input type="checkbox"/>	<input type="checkbox"/>
Textile & Fashion Design	<input type="checkbox"/>	<input type="checkbox"/>
Music	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> January <input type="checkbox"/> April <input type="checkbox"/> August Commencing in _____ (year)		

1. APPLICANT PERSONAL DETAILS

FULL NAME (as per NRIC):		CHINESE NAME (If any) :
NRIC :		AGE :
DATE OF BIRTH :	PLACE OF BIRTH :	
RACE : <input type="checkbox"/> Malay <input type="checkbox"/> Chinese <input type="checkbox"/> Indian <input type="checkbox"/> Others : _____	RELIGION : <input type="checkbox"/> Islam <input type="checkbox"/> Buddhist <input type="checkbox"/> Christian <input type="checkbox"/> Hindu <input type="checkbox"/> Others : _____	
GENDER : <input type="checkbox"/> Male <input type="checkbox"/> Female	MARITAL STATUS : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others : _____	
SPOKEN LANGUAGE (can select more than one) : <input type="checkbox"/> Bahasa Melayu <input type="checkbox"/> Mandarin <input type="checkbox"/> English <input type="checkbox"/> Others : _____		
PERMANENT ADDRESS :		MAILING ADDRESS (To complete if it is different from the permanent address.)
TEL (HOME) :	TEL (H/P) :	
EMAIL :		

2. ACADEMIC BACKGROUND (From Secondary School and Above)

NAME OF SCHOOL / COLLEGE / UNIVERSITY	ACADEMIC QUALIFICATIONS	YEAR OF COMPLETION

3. DISABILITY AND SUPPORT NEEDS

If you declare a disability this will not be a factor in the Institute's decision as to whether or not to offer you a place. However, it is important that the Institute knows if you have any special needs so that we can provide you with the appropriate support and facilities.

Do you have any illness, mental or physical disability that you would like to disclose? : Yes No

If yes, please state your condition and/or attach a medical statement from a registered doctor : _____

4. PARENTS / GUARDIAN DETAILS & EMERGENCY CONTACTS

FATHER'S NAME : NRIC : OCCUPATION : TEL : (H) : (H/P) : EMAIL : ADDRESS (To complete if it is different from the <u>APPLICANT</u> 's permanent address) :	MOTHER'S NAME : NRIC : OCCUPATION : TEL : (H) : (H/P) : EMAIL : ADDRESS (To complete if it is different from the <u>APPLICANT</u> 's permanent address) :
GUARDIAN'S NAME : NRIC : OCCUPATION : RELATIONSHIP : TEL : (H) : (H/P) : EMAIL : ADDRESS :	EMERGENCY CONTACT 1 NAME : Mr / Ms RELATIONSHIP : TEL : (H) : (H/P) : EMERGENCY CONTACT 2 NAME : Mr / Ms RELATIONSHIP : TEL : (H) : (H/P) :

5. DOCUMENTS REQUIRED TO BE SUBMITTED TOGETHER WITH THIS APPLICATION FORM (NON-RETURNABLE) :

<p>NOTE : All photocopied documents must be in A4 size. Submitted documents and portfolio WILL NOT BE RETURNED.</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 passport size photos. <input type="checkbox"/> Photocopy of NRIC. <input type="checkbox"/> Photocopy of birth certificate. <input type="checkbox"/> Certified true copy of SPM or UEC results (minimum 3 credits or equivalent) or other equivalent academic qualification. <input type="checkbox"/> Certified true copy of school leaving certificate. <input type="checkbox"/> Certified true copy of testimonial. <input type="checkbox"/> Portfolio with minimum 5 drawings / paintings / designs in A3 size (for all Art & Design programmes except Music). <input type="checkbox"/> Certified true copy of A.B.R.S.M certificate or equivalent 	<p>Applicants with Diploma or any other higher academic qualifications are also required to submit the following documents for consideration of Credit Transfer / Exemption.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Certified true copy of Diploma or any other higher academic qualification certificate. <input type="checkbox"/> Certified true copy of academic transcript. <input type="checkbox"/> Certified true copy of course description or syllabus. <input type="checkbox"/> Certified true copy of MQA accreditation certificate (if applicable).
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6. APPLICANT AND PARENTS / GUARDIAN DECLARATION & CONSENT

<p>TO BE SIGNED BY APPLICANT :</p> <p>I certify that the information provided in this form is true and correct and MIA reserves the right to retract the offer / terminate my studies at any time if false information / documents have been submitted.</p> <p>I, hereby (select one only) <input type="checkbox"/> agree <input type="checkbox"/> disagree</p> <p>MIA to process my personal information for the purpose of enrolment to MIA's programme.</p> <p>SIGNATURE OF APPLICANT</p> <p>_____</p> <p>NAME : DATE :</p>	<p>TO BE SIGNED BY PARENTS / GUARDIAN :</p> <p>I acknowledge that my child / ward has applied for admission to MIA's programme and the information provided in this form is true and correct. I understand that MIA reserves the right to retract the offer / terminate the studies of my child / ward if false information / documents have been submitted.</p> <p>I, hereby (select one only) <input type="checkbox"/> consent <input type="checkbox"/> do not consent</p> <p>MIA to process my child / ward personal information for the purpose of enrolment to MIA's programme.</p> <p>SIGNATURE OF PARENTS / GUARDIAN</p> <p>_____</p> <p>NAME : DATE :</p>
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