

PART 4 : SUPPORTING AND RECOMMENDATION

25. Brief your reason(s) why you applying this financial assistance

26. Recommendation

Recommendation by : _____
(signature)

Date :

| | | | | | | | |
|-----|--|---|-------|--|---|------|--|
| | | / | | | / | | |
| day | | | month | | | year | |

Official stamp :

YAYASAN UNIVERSITI MULTIMEDIA

PART 5 : STUDENT DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. I hereby authorize sharing of the information furnished on this form with the YAYASAN UNIVERSITI MULTIMEDIA (YUM). In case any of the above information is found to be false or untrue or misleading or misrepresented, I am aware that I may be held liable for it and YAYASAN UNIVERSITI MULTIMEDIA (YUM) has the right to disqualify this application or blacklist my name.

Signature : _____

Name :

Date :

PART 6 : ADDITIONAL INFORMATION

1. Application is open to all fulltime registered student of MMU only
2. Financial assistance only applicable for tuition fees
3. Payment will be paid directly to Finance Department by YUM
4. Applicant is **COMPULSORY** to attach a copy of following documents together with the application form;
 - i. A copy of MyCard (for Malaysian student) OR
Valid International Passport and each travel pages (for international student)
 - ii. Statement of tuition fees (can print from CamSys)
 - iii. Results for every last semester
 - iv. Parents income statement
 - v. Any supporting documents (E.g.; Death certificate, medical report, and etc.)
5. Incomplete form and inadequate supporting documents will be not processed
6. All result is final and will be notified through notices (Email/Letter/Phone call)
7. Completed application form must be submitted to;

Yayasan Universiti Multimedia (YUM)
3rd Floor, STC Building, Persiaran Multimedia,
63100 Cyberjaya,
Selangor.
Phone: +603-8312 5043
E-mail: yum@mmu.edu.my

Verified By,

Signature : _____

Name :

Date :

Approved By,

Signature : _____

Name :

Date :

Note :