

INCEIF BURSARY APPLICATION (NEW STUDENTS)

PERSONAL DETAILS

- Applicants are required to complete all fields in this form. Incomplete application will not be processed.
- If you have enquiries or in the need of further clarification regarding the financial assistance, please email to financial.assistance@inceif.org
- Please e-mail this complete form to financial.assistance@inceif.org

1. Please choose the INCEIF programme that you have applied.

- | | |
|--|---|
| ☐ Executive Masters in Islamic Finance (EMIF) | ☐ Master in Business Administration (MBA Sustainable Business) |
| ☐ Masters in Islamic Finance Practice (MIFP) | ☐ Phd in Islamic Finance (by Coursework and Dissertation) |
| ☐ Master of Science in Islamic Finance (MSc) | ☐ PhD in Islamic Finance (by Research) |

2. Name

3. Gender

- ☐ Male
- ☐ Female

4. Age

5. Identification Number (Mykad or Passport no.)

6. Address

Address

Address 2

City/Town

State/Province

ZIP/Postal Code

Country

7. Nationality

8. Religion

☐ Islam

Other (please specify)

9. Email address

10. Contact Number

11. INCEIF Application ID / Student ID



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APPLICATION INFORMATION

19. Please indicate your preferred intake/semester

- ☐ January semester
- ☐ June semester
- ☐ September semester



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EDUCATION BACKGROUND

12. Highest education qualification

13. Result (e.g. CGPA)



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FAMILY BACKGROUND

14. Total number of dependents



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WORKING EXPERIENCE

15. I am currently:

- ☐ Employed
- ☐ Self-employed
- ☐ Un-employed

16. Type of industry

- ☐ Islamic finance related
- ☐ Non Islamic finance related
- ☐ Non financial related

17. Please indicate monthly income (for non Malaysian, please convert to Malaysian Ringgit)

18. Address of company

Company

Address

Address 2

City/Town

State/Province

ZIP/Postal Code

Country

Email Address



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DECLARATION

By submitting this form, I do solemnly and sincerely declare that;

- 1) The information and particulars contained in my application are true.
- 2) I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Statutory Declarations Act 1960.

20. Signature (to be signed offline)

21. Date

Date / Time

Date

 

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VERIFICATION

(This document can only be considered as VALID for processing of application for Financial Assistance when it has been officially certified by Notary Public or Commissioner of Oaths)

22. Name of Notary Public /
Commissioner for Oaths (to be filled
offline)

23. Notary Public / Commissioner for
Oaths Rubber Stamp and Signature (to
be filled offline)

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NOTARY PUBLIC OR COMMISSIONER

OF OATH. ONCE THE DOCUMENT IS
NOTARISED, PLEASE EMAIL THE
DOCUMENT TO
financial.assistance@gmail.com



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