



THE MALAYSIAN INSURANCE INSTITUTE
APPLICATION FOR MNRB SCHOLARSHIP

RECENT
PASSPORT
PHOTOGRAPH

PROGRAMME APPLIED :	<input type="checkbox"/> AMII (Level 1)
	<input type="checkbox"/> AMII (Level 2)

A. PERSONAL INFORMATION		
Name (per I/C): <i>Mr / Ms / Others</i>	NRIC Number	Nationality
<ul style="list-style-type: none"> • <i>Please attach a copy of your IC</i> 		

Date of Birth	Place of Birth		Gender	Physical Disability <i>(if any)</i>	State of Health
	City	State			
			<input type="checkbox"/> Male <input type="checkbox"/> Female		

Residential Address	Marital Status	Telephone No.
	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated / Divorce <input type="checkbox"/> Widowed	Office : Mobile:.....
Postcode	Email :	

B. EMERGENCY CONTACT			
<i>Family member or individual contact in case of emergency</i>			
Name	Tel. No	Address	Relationship
1.			
2.			

C. EDUCATION				
List all Tertiary Education	Year Attended		Qualification attained	Major/Specialization
	Start	End		

D. FINANCIAL BACKGROUND

Total monthly gross income**

RM

**please attach a latest copy of your certified salary slip

List down the beneficiaries of whom you are financially supporting

No	Name	Relationship	Age

E. CURRENT SCHOLARSHIPS (if any)

Name/Title	Organization/Institution	Amount/Value

F. LANGUAGE PROFICIENCY

Spoken	<input type="checkbox"/> BM <input type="checkbox"/> English <input type="checkbox"/> Mandarin <input type="checkbox"/> Tamil <input type="checkbox"/> Others _____
Written	<input type="checkbox"/> BM <input type="checkbox"/> English <input type="checkbox"/> Mandarin <input type="checkbox"/> Tamil <input type="checkbox"/> Others _____

G. EMPLOYMENT DETAILS*(a) Present employer*

Name of Company	Position Held	Description of Duties	Date Joined	Last Drawn Salary

(b) Previous employer

H. COURSE FEE FINANCING

MNRB will sponsor 50% of the applied programme fees.

Please indicate the source of funds for the remaining 50% course fee for each subject

*(*If company sponsored, company's HR must be the guarantor for MNRB Scholarship Agreement)* Self Company sponsored Withdrawal from EPF**student must pay upfront for the course fee before the commencement of the class.* Others (Please Indicate) _____

I. APPLICANT'S DECLARATION	
<input type="checkbox"/> I certify that the information stated on this application form is accurate and true to the best of my knowledge. <input type="checkbox"/> I authorize background checks of all documents attached in this application of the MNRB Scholarship as necessary for acceptance to the programme applied.	
_____ Signature of Applicant	_____ Date

J. EMPLOYER'S APPROVAL		
<p>I support my staffs professional development and highly recommend him / her to apply for this scholarship to pursue the AMII Level 1 / AMII Level 2.</p> <p>The company's HR is duty bound to notify MII immediately in the event of the individual's resignation from the company.</p>		
_____ Signature	_____ Name - CEO / Regional Manager / Head of Department	_____ Date

Important Note :

Please ensure that the following documents are attached together with this application form.

1. Copy of your identity card
2. Certified copy of transcript and certificates
3. Certified copy of latest one month salary slip
4. Other relevant information or documents that can further support your application

Kindly email this completed form with the required documents to coursemgt@mii.org.my before the closing date on **05 April 2023**.

Please take note that **only** shortlisted candidates will be contacted for as assessment and interview session.

For any information, please email our team at coursemgt@mii.org.my
