

STUDY LOAN APPLICATION FORM

I PERSONAL INFORMATION OF THE APPLICANT

- a) Name
(as stated in NRIC)
- b) NRIC No
- c) Date of Birth
- d) Citizenship
- e) Permanent Address
-
-
- f) Correspondence Address
- (if different from above)
-
- g) Marital Status
- h) Profession
- i) Contact Nos: Home/office
- Mobile
- j) E-mail Address

II ACADEMIC QUALIFICATIONS OF THE APPLICANT

	Level	Grade	Detailed Results
a)	STPM		
b)	SPM		
c)	OTHERS		

***** Please enclose photocopies of all certificates**

III COURSE DETAILS

- a) Course applied for
- b) Date of Commencement
- c) Name of the Educational Institution
- d) Duration of the Course (no. of years)

e) Fee Structure & Related Expenses

Particulars	Annual	Total
Course Fee		
Food & Lodging		
Books		
Others		
Total		

f) **Amount of Loan Required**

g) Have you applied for any other loans? YES / NO

If Yes, give details

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IV PARENTS PARTICULARS

Particulars	Father	Mother
Name		
NRIC No.		
Address		
Occupation		
Office Address		
Contact No.		
Monthly Income		
Details of Assets

(if the assets are under loan, please state)
(please enclose 2 months salary slips/ EA forms of parents)

V FOR APPLICANT WHO IS EMPLOYED

- a) Profession
- b) Organisation
- c) Address
-
-
- d) Contact No.
- e) Monthly Income

VI FOR APPLICANT WHO IS MARRIED

- a) Spouse's Name
- b) NRIC No.
- c) Permanent Address
-
- d) Correspondence Address
-
-
- e) Profession
- f) Monthly Income

VII DETAILS OF BROTHERS & SISTERS

	Name	Occupation	Age	Marital Status	Monthly Income	Monthly Financial Support to Parents (if any)

VIII GUARANTORS*

Particulars	Guarantor 1	Guarantor 2
Name		
NRIC No.		
Date of Birth		
Address (Home)		
Tel:(home/h.p)		
Occupation		
Address (office)		
Tel: (office)		
E-mail address		
Monthly Income		

**(immediate family members cannot stand as guarantors)*

**(guarantors must be below 60 years of age)*

IX DECLARATION

We declare that the above information is true to the best of our knowledge.

Applicant's Signature

Parent's Signature

Date: _____

X RECOMMENDATION BY AMMA AFFILIATE (if applicable)

(Signature of authorised official)

Name of the Official:

Position in the organisation

Official Affiliate Stamp:

XI FOR OFFICE USE ONLY

a) Recommendation by Study Loan Committee

Signed by Chairman,
Study Loan committee

Name _____

Date _____

b) Board's Decision

Approved / Not Approved

c) Amount Approved

d) Date of Approval

e) Remarks, if any

Signed by Authorised Official(s)