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POSTGRADUATE PROGRAMME
APPLICATION FORM

Please complete all fields in **BLOCK LETTERS** and tick (√) at appropriate boxes.

1. Programme Details

Intake : _____

Year : _____

Programme Name

Mode of Study Full-time (weekdays only) *Part-time (weekdays only)

**Applicable for Malaysian Students only*

2. Apply SEV In

Country

City

3. Personal Details

Name (as per NRIC / Passport)

Chinese Name (if any)

Gender Male Female

NRIC/Passport No.

Date of Birth

Race

Religion

Marital Status Single Married

Nationality

4. Contact Details

Correspondence Address

Town State Postcode Country

Telephone (H) - -
(country code) (area code)

Mobile - -
(country) (area code)

Email Address

Permanent Address (if different)

Town State Postcode Country

Telephone (H) - -
(country code) (area code)

Mobile - -
(country code) (area code)

Name of Emergency Contact

NRIC/Passport No. Relationship

Telephone (H) - -
(country code) (area code)

Mobile - -
(country code) (area code)

Email Address

5. Application details

Specialisation / Area of Study

Attached to Research Institute/ Centre Yes No

If "Yes", please specify:

Source of Finance (If "Self Support", please upload pay slips and bank statements; For Other Source of Finance, please specify)

Applicable for Research Programmes Only

Proposed Supervisor

Proposed Thesis Title/ Area of Research

Informed Proposed Supervisor? Yes No

6. Academic Qualification

Period of Study		Full-time / Part-time	Name of Institution/ Country	Qualification Obtained	CGPA / Class	Language of Instruction
From	To					
<i>Example</i>						
02/2016	01/2019	Full-time	Xiamen University Malaysia, Malaysia	Bachelor of Chemical Engineering with Honours	3.8/4.0 1 st Class	English

Professional Qualification (if any)

Year	Professional Body	Examination / Exemption	Stage / Level	Language of Instruction

7. Language Proficiency

English Language Qualification

Type of Test	Score/Band	Date Obtained
		[M][M][Y][Y][Y][Y]
		[M][M][Y][Y][Y][Y]
		[M][M][Y][Y][Y][Y]

8. Working Experience (3 most recent)

From MM/YYYY	To MM/YYYY	Name of Employer	Position	Nature of Work

9. Awards/ Prizes

Date of Award/ Prize	Name of Award/ Prize	Awarding Body	Details of Award/ Prize

10. Membership of Professional Institutions/ Societies

From (Date)	To (Date)	Position/ Type of Membership	Name of Organisation

11. Publications

No.	Title of Publication	Name of Journal	Vol, Year, Page No.	ISI (Q1/ Q2)	Authorship (First/ Second)

12. Others

Do you have any physical disability or illness? Yes No

If "Yes", please specify the nature of condition(s) and enclose a copy of the medical report.

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13. Questionnaire

No.	Question	Answer
1.	The University usually conducts the admission interview either face-to-face or MS Teams. Please indicate the month of intake.	
2.	APPLICATION: Are you applying to any other graduate programme at XMUM for the same academic year? If yes, please identify them.	
3.	PREVIOUS APPLICATION: Have you previously applied for admission or been admitted to any graduate programme at Xiamen University Malaysia? If yes, please identify: (a) Programme applied to (b) Year of application (c) Outcome of application (Successful/ Unsuccessful)	
4.	Please choose at least one of the Research clusters/ Strategic Research Thrusts found in XMUM CME: <ul style="list-style-type: none"> • Green Catalysis • Sustainable Materials • Sustainable Bioproducts & Green Technologies (SBGT) • System Engineering • Analytical Chemistry 	
5.	If you have indicated proposed supervisor(s) at XMUM in the application, have you made any contact with him/her/them? And where?	
6.	Please indicate whether you will be receiving other scholarship, fellowship or award or salary if you are successful in gaining admission to this University	
7.	Do you wish to be considered for admission if your research scholarship application is not successful? (Yes/ No/ Not applicable)	
8.	Were you receiving any scholarship during your undergraduate study? If yes, please provide details: Name of Scholarship, Sponsor and Length of bond (if any).	

14. Referees

Referee 1 Name

Designation Organization

Telephone (H) - - Email Address
(country code) (area code)

Referee 2 Name

Designation Organization

Telephone (H) - - Email Address
(country code) (area code)

Your application will not be complete without the receipt of 2 Referee Reports, which your referees will submit to: cpscsecretary@xmu.edu.my
Please indicate their email contacts accurately when associating the referees with your application. There is no need for hardcopy letters.

15. Checklist

Please check that your application is complete and that you have enclosed the following documents:

1. A copy of Passport (All pages include cover & empty pages)
(Please make sure that passport validation is at least 18 months from the expected intake date)
 2. Eight (8) passport-sized colour photographs with WHITE background (3.5 x 5cm)
 3. A certified true copy of academic transcript of previous studies together with its legend (explanation of marking system)
(Please provide translation of transcript if it is not in English)
 4. A certified true copy of Graduation Certificate or Letter of Completion
 5. A certified true copy of membership of professional bodies *(if applicable)*
 6. A certified true copy of English Language Proficiency Test result *(if any)*
 7. Proof of employment (1 offer letter of employment **or** accumulated 3 years of employment) *(if applicable)*
 8. A certified true copy of academic transcript of previous studies together with its legend (explanation of marking system)
 - A. EMGS Medical Form
 - B. Medical Screening Laboratory Result
 - C. X-Ray Report
 - D. Yellow Fever Card (for students from Sub-Saharan country)
 - E. Vaccination Record/card (if applicable)
 9. Proof of payment or T/T slip of RM2,800
 10. Others
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16. Declaration by Applicant

I have read and fully understood all the terms and conditions governing admission for this application. I hereby declare that all the information provided in this application and its attachments or supporting documents are true, correct and complete in all respect and no information has been willfully or intentionally misrepresented, withheld or concealed. I acknowledge and agree that Xiamen University Malaysia (XMUM) reserves the right to vary or reserve any decision regarding admission and enrolment made on the basis of incorrect, incomplete or fraudulent information. I have read and understood the Personal Data Protection Notice of XMUM accessible via www.xmu.edu.my and I hereby agree and consent to the use, processing and transfer of my personal data by XMUM, in accordance with the terms of the said Notice.

Applicant's Signature

Date

D	D	M	M	Y	Y	Y	Y
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Account Name : XMU JIAGENG EDUCATION DEVELOPMENT SDN. BHD.

Bank : Public Bank Berhad

Account No : 319-724-8410

Branch : KL City Main Office

Swiftcode : PBBEMYKL

Please send the completed application form with all supporting documents and items stated as above to us via email, by hand or post to:

Admissions Office

Xiamen University Malaysia DULN009(B)

Jalan Sunsuria, Bandar Sunsuria,

43900 Sepang, Selangor Darul Ehsan.

T : +603 7610 2079

+603 8705 5186

E : pg.enquiry@xmu.edu.my

W : www.xmu.edu.my

17. For Office Use

Counsellor:		Agent:			
Date:					
Details of degree					
Degree in a related field		<input type="checkbox"/> Yes <input type="checkbox"/> No	Classification of Honors	CGPA	
Years of working experience		years in a related field		years Not in a related field	
The applicant fulfills the minimum entry requirement		<input type="checkbox"/> Yes <input type="checkbox"/> No	Remark	<input type="checkbox"/> Required rigorous internal (technical) assessment	
Recommendation		<input type="checkbox"/> Clear-cut case <input type="checkbox"/> Not clear-cut case			
Remarks					
Programme offered					
Offer made by		Date		Application No.	
Unconditional offer		Reject		Conditional offer	
Scholarship		% tuition fee waiver			



XIAMEN UNIVERSITY MALAYSIA
廈門大學 馬來西亞分校

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