



## APPLICATION FORM

## REGULAR COURSES FOR FISCAL YEAR 2019/2020 (BATCH 1)

Please type or write clearly in capital letters. Do not leave any space blank. Use "NIL" or "N/A" where applicable

Please tick ✓ your choice. Kindly note that once you have indicated the subject, you are NOT allowed to change.

Application for: ☐ Science ☐ Mathematics

Course Code:	Duration of the Course: 5-30 August 2019
Title of Course:	Country:

1. PERSONAL DATA	
Family Name (surname) :	Date of birth : Day   Month   Year
First Name :	Nationality ( citizenship ) :
Other Names :	Gender : Male / Female #
City and country of birth :	Marital status : Single / Married #
Passport No :	Type of Passport:
Expiry Date:	Religion :

# Delete accordingly

## 2. COMMUNICATION AND MAILING ADDRESS

Applicant's Office Address :		Applicant's Postal / Home Address :	
Mobile Phone Number	Country   Area   Number	Home telephone	Country   Area   Number
Office telephone	Country   Area   Number	Telefax	Country   Area   Number
Country   Area   Number	Country   Area   Number	Email	Country   Area   Number

Person to be contacted **in case of emergency** :

Name : \_\_\_\_\_

Telephone : \_\_\_\_\_

Address : \_\_\_\_\_

Email : \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

3. EDUCATION (list from highest qualification)

Name of Colleges/ Institutions/ University & Country	Major Field of Study	Years of study : from - to	Degree

4. EMPLOYMENT RECORD (list from current position onwards)

Name of Institution/Employer	Position	Years of work: from - to

# Delete accordingly

Describe your work and responsibility:

5. REASONS FOR APPLYING THIS COURSE

Please state briefly the reasons for applying to this course and how you hope to benefit from the course.

6. OVERSEAS COURSES / CONFERENCES / SEMINARS ATTENDED INCLUDING PROGRAMME OF SEAMEO RECSAM

Name of Conference/ Seminar	Venue	Date: from - to

# Delete accordingly

7. ENGLISH LANGUAGE PROFICIENCY

	Excellent	Good	Fair	Basic	Remarks
Listening					
Speaking					
Writing					
Reading					

Please tick v/ your choice.

I need English language support during the course in SEAMEO RECSAM: ☐ Yes ☐ No

8. INFORMATION, COMMUNICATION AND TECHNOLOGY (ICT) SKILLS PROFICIENCY

	Excellent	Good	Fair	Basic	Remarks
Microsoft Office					
Email					
Internet					

Date ..... Signature of Applicant/Participant .....

Recommended by Ministry of Education

Date ..... Signature & Name of Official on behalf of Minister of Education .....

IMPORTANT: THIS FORM SHOULD BE COMPLETED IN DUPLICATE. A COPY TO BE SENT THROUGH YOUR MINISTRY OF EDUCATION BY REGISTERED AIRMAIL TO REACH THE FOLLOWING ADDRESS

DIRECTOR  
SEAMEO RECSAM, JALAN SULTAN AZLAN SHAH,  
11700 GELUGOR, PENANG, MALAYSIA





## SEAMEO RECSAM SCHOLAR AGREEMENT

THIS DEED is made the \_\_\_\_\_ day of \_\_\_\_\_ Two Thousand and Nineteen (2019) between \_\_\_\_\_ of \_\_\_\_\_

(hereinafter called 'the Scholar') of the first part and the Southeast Asian Minister of Education Organization (hereinafter called 'SEAMEO') of the second part.

WHEREAS the Scholar will pursue the course of training specified in the Schedule hereto (hereinafter called 'the Course') at the SEAMEO Regional Centre for Education in Science and Mathematics in Penang, Malaysia under a scholarship granted by SEAMEO, AND WHEREAS the Scholar has expressed his willingness to accept the Scholarship upon the terms hereafter set out:

NOW THIS DEED witnessed as follows:

1. In this deed unless the context of otherwise requires:

Words importing the masculine gender include females;

Words in the singular include the plural and words in the plural include the singulars;

2. The Scholar hereby covenants:

- (i) that he will enter upon and diligently continue in the Course and that he will complete the Course within the prescribed time specified in the Schedule hereto;
- (ii) that he will devote his whole time to the Course and will, to the best of his ability apply himself to the Course to the satisfaction of the supervisors, tutors or instructors associated therewith;
- (iii) that he will follow all the sessions of the Course and sit for all the assessment tests prescribed, if any, for the Course within the limits of time prescribed in the Schedule hereto;
- (iv) that he will conform to the regulations and discipline in force from time to time at his place of study or training and at his place of residence;
- (v) that he will reside in SEAMEO RECSAM's hostel, or other place as directed by the Director of the SEAMEO Regional Centre for Education in Science and Mathematics (hereafter called 'the Director');
- (vi) that all rights, including title, copyright and patent rights, in any work produced by him as part his course/project of SEAMEO RECSAM shall be vested in the Course;
- (vii) that he will not undertake any occupation, either remunerative or otherwise, outside the course except with prior approval of the Director;
- (viii) that he will, if in receipt of any remuneration, whether in money or money's worth for any work or service which he is required to undertake or perform as part of the Course or any award gained during the Course, report the same to the Director and shall if so required by the Director surrender to the Director all or such proportion of any such remuneration or award as the Director may determine, retaining any remainder thereof for himself;
- (ix) that he will refrain from participation in political activities not normally permitted in the institutional in which the Course is taken;
- (x) that he will not change his subjects of study or programme of training or take any additional courses without the prior written permission of the Director; and
- (xi) that he will not leave the country unless with the joint approval of his Ministry of Education as well as that of the Centre Director.

*Scholar Agreement*

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3. If the Scholar shall:-

- (i) be idle or grossly misbehaves himself towards the supervisors, tutors, or instructors associated with the Course or commit a breach of his obligations under this deed; or
- (ii) by reason of illness or injury be unable to carry out his obligations under this deed;

Then in either of those cases SEAMEO may forthwith terminate the scholarship by giving notice to the Scholar but without prejudice to the rights of the parties hereunder in respect of any antecedent breach of the covenants and stipulations herein contained.

4. The Scholar for himself and his/her personal representative hereby further undertakes:-

- (i) to absolve SEAMEO including its servants from any liability to the Scholar for loss of life or injury to his person or damage or loss to his property arising from the negligence of the servants of SEAMEO; and
- (ii) to indemnify and keep harmless SEAMEO against all proceedings, suits, actions, claims, demands, costs and expenses whatsoever which may be taken or made against SEAMEO or incurred or become payable by SEAMEO in respect of injury (whether fatal or otherwise) to any person of damage or loss to any property occasioned directly or indirectly by any act, omission or other default by the Scholar while on or otherwise in relation to or arising out of the Course.

5. It is hereby agreed that any right, function or power conferred on SEAMEO under this deed may be exercised by the Director or any person duly authorized by him in that behalf.

IN WITNESS WHEREOF the Scholar and SEAMEO by its duly authorized representative have set their hands and seals hereunto the day and year first above written.

THE SCHEDULE ABOVE REFERRED TO

Signed, sealed and delivered by  
The SCHOLAR in the presence of:

Signature ..... ) .....  
(Witness) ) (Signature of SCHOLAR)

Name ..... )  
Address ..... )  
..... )

Signed, sealed and delivered by the DIRECTOR of the SEAMEO  
Regional Centre for Education in Science and Mathematics in Penang  
Malaysia, who has been duly authorized to act in that behalf for the

Signature ..... ) .....  
(Witness) ) (Signature of DIRECTOR, SEAMEO REGSAM)  
Name ..... )  
Address ..... )  
..... )

Scholar Agreement

MEDICAL FORM

(to be completed by an authorised physician and required to be submitted after notification of successful selection)

Name of Applicant:			
Age:	Gender:	Height:	Weight:
		cm	kg
Blood Pressure:			
Blood Group:			
<div><input type="checkbox"/> A</div> <div><input type="checkbox"/> B</div> <div><input type="checkbox"/> AB</div> <div><input type="checkbox"/> O</div> <div>Other (     )</div>			
Is the person examined at present in good health?		Is the person free of infectious diseases (AIDS, tuberculosis, trachoma, skin diseases etc.)?	
List any abnormalities indicated in the chest X ray.		List any other sickness (diabetic, high blood pressure etc.)	
I certify that the applicant is medically fit to undertake a course in Malaysia.			
Name of Physician:			
Address of Clinic:			
Telephone:			
Email:			
Signature of Physician:		Date:	
Seal of Clinic:			



CHECKLIST

Name: \_\_\_\_\_

Country: \_\_\_\_\_

No	ITEM	QUANTITY	YES/NO
1	APPLICATION FORM	1	
2	PHOTOCOPY OF PASSPORT* (Only the front page with participants' particular are required)	1	
3	SCHOLAR AGREEMENT	1	
4	MEDICAL REPORT (*upon notification of successful selection)	1	

Note: Deadline for nomination form submission is 14 June 2019