

## **APPLICATION FOR ZAKAT ASSISTANCE**

### **INSTRUCTION SHEET**

1. Please read this Instruction Sheet carefully before completing the Zakat Assistance Application Form. This Instruction Sheet will guide you to fill the form correctly. Incomplete forms or forms that are filled incorrectly will be automatically rejected.
2. This application is open to all **MUSLIM** students only.
3. You are required to fill this form personally with your own handwriting. Each applicant is required to complete and submit one (1) set of the form only. Submission of the form must be accompanied by the following documents:
  - a. One (1) photocopy of the applicant's MyKad;
  - b. One (1) photocopy of the applicant's student ID Card;
  - c. One (1) photocopy of the parents' MyKad;
  - d. One (1) set of transcript of all examinations; and
  - e. Parents'/guardian's salary slip.
4. Completed forms must be submitted **BEFORE/OR 23 NOVEMBER 2018** to the Finance Department of DRB-HICOM University of Automotive Malaysia (DRB-HICOM U).

*\* All the documents above (No. 3a – e) must be "Certified True Copy" by the either the Parents' or Guardian's Employer(s), Headmaster, Principal, Penghulu or a Government Official (Grade A) within the applicant's residential locality.*

# ZAKAT SCHOLARSHIP APPLICATION FORM

**ACADEMIC YEAR:** \_\_\_\_\_

## PERSONAL PARTICULARS

a. Full Name (as printed in MyKad):		b. MyKad No. :
		Student ID No.:
c. Permanent Address:		
d. Correspondence Address (If different from Permanent Address):		
e. Age	f. Tel No. (Residence):	g. Tel No. (Mobile):
h. Date of Birth (dd/mm/yy):	i. E-mail Address:	
j. Sex:	k. Marital Status (If married, please fill Spouse's Details):	
l. Occupation (if any):	m. Gross Monthly Income (if any):	n. Employer/Contact No.(if any):
o. Parents' Employment Details Please tick [√] if any of your parents (or both) is (are) employee(s) of DRB-HICOM or its Group of Companies:		
<input type="checkbox"/> Yes, Father: ..... Company: ..... Mother: ..... Company: .....		
<input type="checkbox"/> No		

## SPOUSE'S DETAILS

a. Full Name (as printed in MyKad):		b. MyKad No.:
c. Occupation (If any):	d. Employer/Contact No. (if any):	e. Gross Monthly Income (If any):
f. Permanent Address:		
g. Correspondence Address (if different from above):		

<b>ACADEMIC STATUS</b>		
Intake	: .....	Semester : .....
Program	: .....	Current CGPA : .....
<b>FAMILY BACKGROUND AND FINANCIAL RESOURCES</b>		
	<b>Father*/Guardian</b>	<b>Mother*</b>
a. Name (as printed in MyKad)		
b. Nationality		
c. MyKad No.		
d. Religion		
e. Occupation		
f. Monthly Gross Income (RM)		
g. Telephone No. (Residence)		
h. Telephone No. (Mobile)		
i. Name of Employer & Employer's Telephone No. <i>(to fill if not employed under DRB-HICOM and its Group Of Companies)</i>		
j. Signature of Parents		

\* In any case where both parents are not available, please fill in the Guardian's particulars using "Father" column and delete the "Father" term accordingly.

**SIBLINGS INFORMATION**

Name / Relationship (i.e. brother/sister)	Age	Marital Status	Occupation	Monthly Gross Income (RM)
a.				
b.				
c.				
d.				
e.				
f.				
g.				
h.				

**RECURRING HOUSEHOLD EXPENSES (RM)**

Expenses	Monthly	Annually
a. Housing loan instalment(s) / Rental(s)		
b. Electricity bill		
c. Water Bill		
d. Car loan Instalment(s)		
e. Transportation costs (i.e. petrol, fare, etc.)		
f. School fees / Education loan instalment(s)		
g. Child care / Nursery		
h. Medical (critical or long term)/Disability Cost		
i. Total		

**OTHER FINANCIAL ASSISTANCE/SCHOLARSHIP(S)**

Have you ever accepted/currently receiving any financial assistance and or scholarships awarded by other organisation(s)/Body(ies) to finance your studies?

Yes (please fill in below)

No

**FINANCIAL ASSISTANCE/SCHOLARSHIP(S) RECEIVED**

Organisation(s)	Duration (Years)	Value Per Year (RM)	Bonding Arrangement(s)
a.			<input type="checkbox"/> Yes, ..... years <input type="checkbox"/> No
b.			<input type="checkbox"/> Yes, ..... years <input type="checkbox"/> No

**DECLARATION**

I hereby declare that all information furnished above are accurate and true to the best of my belief and knowledge and that The DRB-HICOM University of Automotive Malaysia (DRB-HICOM U) may terminate or withdraw this Application should any information is discovered to be inaccurate or untrue.

Name: ..... Signature: .....

Date :

**VERIFICATION\***

*I hereby verify that all the information provided is accurate and true.*

Name: ..... Signature: .....

Designation: ..... Date : .....

Official Stamp:

*\* This section is to be completed by the Employer of either parent or guardian / Headmaster / Principal / Penghulu / Government Office of Grade A within the residential vicinity. Should either parent is employed within the DRB-HICOM Group, this section is to be completed by the Head of Department/Section of the parent.*

FOR DRB-HICOM U ADMINISTRATION USE ONLY	
Date Received:  Received by:	Signature
Proposed Date of Interview:	Interview Date Communicated by:
<b>Selection Panel – Interviewer No. 1</b> Name: Designation Date: Signature of Interviewer:	<b>Comments by Interviewer:</b>
<b>Selection Panel – Interviewer No. 2</b> Name: Designation Date: Signature of Interviewer:	<b>Comments by Interviewer:</b>
<b>Selection Panel – Interviewer No. 3</b> Name: Designation Date: Signature of Interviewer:	<b>Comments by Interviewer:</b>
<b>Recommendation for Zakat Assistance</b> <input type="checkbox"/> <b>Yes, please identify type of zakat assistance</b> <input type="checkbox"/> No	<input type="checkbox"/> <b>Zakat Fakir</b> <input type="checkbox"/> <b>Zakat Miskin</b> <input type="checkbox"/> <b>Zakat Fisabilillah</b> <input type="checkbox"/> <b>Zakat One-off</b>