

Direct Application for Admission to Undergraduate Programmes at UoSM

Please return your completed form to:

- Admissions, University of Southampton Malaysia, No.3 Persiaran Canselor 1, Kota Ilmu EduCity @ Iskandar, 79200 Nusajaya, Johor, Malaysia

Application Reference Number (Office Use Only)

- Email to: admissions.malaysia@soton.ac.uk

Have you applied to the University of Southampton before? ☐ Yes ☐ No

If Yes, what was your University of Southampton ID number?

Nationality

Non Malaysian nationals only: Have you previously applied to other institutions in Malaysia? ☐ Yes ☐ No

If yes please give name(s)

Are you currently studying in any institution in Malaysia? ☐ Yes ☐ No

Have you previously held student pass approval from an institution in Malaysia? ☐ Yes ☐ No

If yes, what type of pass was held?

What was the expiry date (DD/MM/YY)

1. Personal Details

All names must be written as they appear in your passport

Title (Mr/Mrs/Miss/Ms/Dr)

☐ Male

☐ Female

Surname of family name

Forenames in full

Date of Birth in full (DD/MM/YYYY)

NRIC number (Malaysian Nationals only)

Home Address

Postcode

E-mail

Telephone

Mobile

Continued overleaf

1. Personal Details (continued)

Country of Birth Country of permanent residence

Passport Number

Will you need assistance to find accommodation while you study?

2. Proposed Programme of Study

Please select the course to which you are applying

☐ MEng Aeronautics and Astronautics ☐ MEng Electrical and Electronic Engineering ☐ MEng Mechanical Engineering

Proposed year of admission Please note that intake is only offered in September each year

3. Additional Needs (See Guidance Notes)

Please tick the relevant box if you have any of the following disabilities/medical conditions which might require special arrangements or facilities

| | | |
|--|---|---|
| <input type="checkbox"/> 1 Learning Difficulty (Dyslexia) | <input type="checkbox"/> 5 Mental Health Difficulties | <input type="checkbox"/> 9 Autism Spectrum Disorder |
| <input type="checkbox"/> 2 Blind/Partial Sighted | <input type="checkbox"/> 6 Unseen Disability e.g. Diabetes | <input type="checkbox"/> 10 Temporary Disability |
| <input type="checkbox"/> 3 Deaf/Hearing Impaired | <input type="checkbox"/> 7 Multiple Disabilities | |
| <input type="checkbox"/> 4 Wheelchair user/Mobility Difficulties | <input type="checkbox"/> 8 Disability/Medical Condition not mentioned above | |

Are you registered disabled? ☐ Yes ☐ No

4. Current and Expected Qualifications for Entry

School

Qualification

Grade/Result (Top 4 Subjects)

Physics

Maths

Add. Maths

Others

Expected Grade

Date to be awarded Language of Instruction

5. Other education qualifications completed since your 11th year of schooling

| | | | |
|-----------------------|--|--------------------------------|--|
| School/College | | | |
| Qualification | | | |
| Grade/Result | | | |
| Date Awarded | | Language of Instruction | |

6. English Language Proficiency

Please complete this section fully and, if possible, enclose a copy of your English language certificate with the application form.
Please note: as a condition of your offer, you may need to supply the original transcript. English language qualifications must date back no more than two years.

a. Do you consider English to be your first language? ☐ Yes ☐ No

b. Please provide details of the test date and outcome.

IELTS Scores: Overall Listening Reading Writing Speaking

Test Report Form (TRF) number (if known) Date

English Language 1119 Grade Date

IGCSE English Grade Date

Other English language qualification Title Score Date

c. Are you planning to take an English Language test? ☐ Yes ☐ No

If yes, please provide details of the planned test and date Date

If no, please note that you may be required to take an English Language test as a condition of entry.

7. Criminal Convictions

If you have a relevant criminal conviction, enter X in the box ☐

8. Please tell us where you heard about the University of Southampton Malaysia ?

- | | | |
|------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Television | <input type="checkbox"/> Youtube |
| <input type="checkbox"/> Magazine | <input type="checkbox"/> Facebook | <input type="checkbox"/> Recommended by a Friend/UoSM Student |
| <input type="checkbox"/> Billboard | <input type="checkbox"/> Instagram | <input type="checkbox"/> Others, please specify _____ |
| <input type="checkbox"/> Poster | <input type="checkbox"/> Twitter | |

9. What made you choose us for your study?

- | | |
|---|---|
| <input type="checkbox"/> High-quality education and research | <input type="checkbox"/> Better career prospects after graduation |
| <input type="checkbox"/> Affordable cost of living | <input type="checkbox"/> Good surroundings and facilities |
| <input type="checkbox"/> Reasonable tuition fees | <input type="checkbox"/> Excellent support services for students |
| <input type="checkbox"/> Unique education experience (2+2model) | <input type="checkbox"/> Others, please specify _____ |

10. Declaration - *Unsigned or un-ticked application forms cannot be processed*

By submitting this application form:

I declare that the information I have provided is accurate and no material information has been omitted. Any work submitted in support of this application is entirely my own. I consent to the University processing my application. I agree to abide by the University's rules and regulations, if accepted onto a course.

If submitting by e-mail please tick this box to agree with this statement ☐

If submitting by post please sign below:

Date

11. Checklist

All applicants must submit :

- | | |
|--|--|
| <input type="checkbox"/> Completed all relevant sections of this form | <input type="checkbox"/> Enclosed any additional evidence (e.g. transcripts of studies) |
| <input type="checkbox"/> Enclosed English Language Certificate (if applicable) | <input type="checkbox"/> Contacted your referee and asked them to forward their reference to us you on your behalf |
| <input type="checkbox"/> Completed Section 7 relating to criminal convictions | <input type="checkbox"/> One photocopy of NRIC (Malaysian only) / |
| <input type="checkbox"/> Signed or ticked box in section 10 | One photocopy of passport detail page (International student) |

12. Office Use Only

12.1 Agent

Counselor:

Date:

Event:

12.2 UoSM

Counselor:

Date:

Event:

Remarks:

The University collects information about its students for various academic, administrative, health and safety reasons. The information is processed in accordance with the Malaysian Personal Data Protection (PDP) Act 2010, and is disclosed to third parties only with the individual's consent or to meet statutory obligation. The information provided on this application form will be stored electronically and used for administrative purposes only by the University.