

Please complete this form clearly and accurately.

New Student Old Student

PERSONAL INFORMATION

Name: _____			
IC No: _____		E-mail: _____	
Date of Birth: ____ (month) ____ (day) ____ (year)	Mobile: _____	Home Number: _____	
Address: _____			
City: _____	State _____	Zip Code: _____	

PARENTS INFORMATION

FATHER	MOTHER
Name: _____	Name: _____
Mobile: _____	Mobile: _____
Occupation: _____	Occupation: _____
Address: _____	
City: _____	State _____ Zip Code: _____

SCHOOL LAST ATTENDED

LEVEL	NAME OF SCHOOL	YEAR ATTENDED	
SPM		Start:	End:

PMR / SPM RESULTS

MATHEMATICS		BAHASA ENGLISH	
SCIENCE		BAHASA MELAYU	

COURSE

Mechatronics Tool & Die Others

COURSE DURATION (1st Semester)

Class Start	- -	Class End	- -
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LATE ENROLLEE

Which class to join-in	Class Name:	Sign:
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MIT ACADEMY ENROLLMENT FORM

ADMISSION YEAR-2013

REGISTRATION & OTHERS						
	QUANTITY	AMOUNT	TICK	TOTAL	RECEIPT #	SIZE
MECHATRONICS						
a. Registration Fees		390.00				
b. Free Shirt	1 (free)	-				
c. Free T-shirt	1 (free)	-				
d. Goggles	1	7.00				
e. Extra Shirt	1	40.00				
f. Extra T-shirt	1	20.00				
g. Hostel payment	6 months	720				
	1-YR	1,440				
		TOTAL				
Tool & Die Maker						
a. Registration Fees		390.00				
b. Free Shirt	1 (free)	-				
c. Free T-shirt	1 (free)	-				
d. Goggles	1	7.00				
e. Extra Shirt	1	20.00				
f. Extra T-shirt	1	40.00				
g. Hostel payment	6 months	720				
	1-YR	1,440				
		TOTAL				

HOSTEL	
Hostel: YES <input type="checkbox"/> NO <input type="checkbox"/>	Locker Key : YES <input type="checkbox"/> NO <input type="checkbox"/>
Room Number: _____	

HOW DO YOU KNOW ABOUT US?			
Open day	Place: _____	Introduce by friends	
Walk-in		Education fair	Place: _____
Website		Others	

Note: Information will be used to process your course enrollment form and will be held and processed in accordance with MIT Academy rules and regulations.

I verify that the above information is correct to the best of my knowledge. I accept that providing false information deliberately could result in my dismissal.

Signature: _____

Date: _____

Assessed by: _____

Date: _____