

馬來西亞高州總會中學助學金申請表  
MALAYSIA KOCHOW ASSOCIATION  
APPLICATION FORM FOR SCHOLARSHIP OF MONETARY ASSISTANCE

英文	中文	相 片 Photo
<p>1. 申請人姓名 Name of Applicant _____ <i>(In Block Capitals)</i></p> <p>出生日期 _____ 性別 _____ 身份證號碼 _____ Date of Birth _____ Sex _____ I/C No. _____</p> <p>就讀班級/中學 Present Form _____</p> <p>校 址 Address of School _____</p>		
<p>2. 會員姓名 Name of Member _____ <i>(In Block Capitals)</i></p> <p>與申請人關係 Relationship to Applicant _____</p> <p>職業 Occupation _____</p> <p>肆業子女人數 Number of Children In School _____</p> <p>收入 Salary _____</p> <p>地址 Address _____</p> <p>電話號碼 Telephone No. _____</p> <p>會員號碼 Membership No. _____</p> <p>入會年份 Year of admission _____</p> <p>日期 Date _____</p>		
<p>會員簽名 Signature of Member</p>		<p>申請人簽名 Signature of Applicant</p>

助學金委員會用 FOR OFFICIAL USE ONLY

日期  
Date \_\_\_\_\_

助學金委員會評語  
Sub-Committee's Recommendation \_\_\_\_\_

常務董事會決策  
Committee's Decision \_\_\_\_\_

助學金委員會主席  
Chairman of Sub-Committee \_\_\_\_\_

會長  
President \_\_\_\_\_

注意：此申請書必須在每年四月卅日之前填妥送交本會辦事處，具有二年以上會員資格的子女，方能申請此助學金。

NOTE: This Form should be completed and delivered to the Association office on or before 30<sup>th</sup> April each year. Only children of members who have completed two years membership are eligible to apply for the incentive award of monetary assistance.