



**THE MALAY COLLEGE KUALA KANGSAR  
INTERNATIONAL BACCALAUREATE DIPLOMA PROGRAMME  
33000 KUALA KANGSAR,  
PERAK, MALAYSIA**

Phone : +605-7761680 Fax : +605-7763719

(photo)

**Application Form**

( Please complete this form neatly in BLOCK letters )

**I. PERSONAL PARTICULARS**

Name:

NRIC No:

Date of Birth :

Age:

Address:

Tel:

Email:

**II. ACADEMIC DETAILS**

SPM Result: *(Please include a copy)*

Subject	Grade	Subject	Grade

**KNOWLEDGE OF LANGUAGES** *(Excellent, Average)*

Language	Written	Spoken

**III. CO-ACADEMIC ACTIVITIES**

School Sports/Clubs/Societies	Position held	Period of Involvement

Special knowledge/Skills (in music, drama, dance etc.)

Awards/training/medals/prizes received	
Description	Year

IV. FAMILY BACKGROUND	
<b>Parents/Guardians</b>	
Name:	
NRIC No :	Relationship:
Occupation:	Income:
Company Address:	
Tel:	Email:
Name:	
NRIC No:	Relationship:
Occupation:	Income:
Company Address:	
Tel:	Email:



## VI. DECLARATION

I hereby acknowledge that all information provided or shall be provided by me in this form or through any other supporting documents are true and accurate and MCKK shall be at liberty to decline my application herewith if any information provided by me is found to be false and inaccurate.

This form may be reproduced in Portable Document Format (PDF), photocopied or facsimile, and the reproduced form shall be binding on me as the original.

By signing below, I hereby acknowledge that I have read, understood and agree to the above statement(s).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Please submit this form by emailing to us at **[ibc@mckk.edu.my](mailto:ibc@mckk.edu.my)**