

FELDA GLOBAL VENTURES HOLDINGS BERHAD SCHOLARSHIP PROGRAM 2017

Felda Global Ventures Holdings Berhad (FGV) is Malaysia's leading global agri-business and the world's largest producer of Crude Palm Oil (CPO). FGV's operations stretch across more than 10 countries in Asia, the Middle East, North America and Europe, and are focused on three main business sectors namely Plantation Sector, Logistics & Others (LO) Sector and Sugar Sector. FGV is the world's third biggest oil palm plantation operator, has the world's largest bulking and storage facilities for vegetable oil and is Malaysia's top refined sugar producer. In our commitment to provide education opportunities to the community, we are looking for talented Malaysians who aim to succeed in their respective fields. Successful applicants will receive a full scholarship to pursue first degree studies.

<u>FIELDS OF STUDY</u>	<u>ACADEMIC REQUIREMENTS</u>	<u>GENERAL REQUIREMENTS</u>
<ul style="list-style-type: none"> • Plantation Management/ Agricultural Science; • Mechanical / Mechatronic Engineering; • Chemical Engineering; • Biotechnology/ Biochemistry; • Accountancy/Finance/ Marketing 	<ul style="list-style-type: none"> • Completed Local Matriculation or Diploma in year 2017 or STPM in year 2016 with minimum CGPA of at least 3.30 • Pursuing full time first year degree program at selected university 	<ul style="list-style-type: none"> • Malaysian Citizen. • Not exceeding 22 years of age on 31 December 2017. • Demonstrate leadership capabilities through active involvement in extra-curricular activities / sports. • Posses excellent command of spoken and written English and Bahasa Melayu.

HOW TO APPLY

- Please click on the link www.hep.upm.edu.my/faildokumen to download the Scholarship Application Form.
- The completed Application form with relevant documents should be sent to the Student Affairs Division.

*For further details, kindly visit our website www.feldaglobal.com

CLOSING DATE
21 SEPTEMBER 2017

**FGV SCHOLARSHIP PROGRAM 2017
APPLICATION FORM**



BACHELOR'S DEGREE / UNIVERSITY DETAILS

Course :

Current Semester : Year :

University :

SECTION A: PERSONAL DETAILS

Name (as per MyKad) :

NRIC : - -

Date of Birth : - - Age :

Place of Birth :

Permanent Address :

Post Code : State :

Correspondence Address :

Post Code : State :

H/P Contact No. :

Home Contact No. :

E-mail :

Gender :

Race :

Religion :

Marital Status :

Nationality :

SECTION B: ACADEMIC QUALIFICATIONS

Section B1

Level : Sijil Pelajaran Malaysia (SPM)

Course :

Name of School :

SPM Result (Year) :

No.	Subject	Grade
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

*Note: Please enclose the copy of SPM Result

Section B2

Level (tick where appropriate)	Name of Institution / School	Course	CGPA	Completion of Study
Diploma <input type="checkbox"/>				Month : Year :
Matriculation <input type="checkbox"/>				Month : Year :
STPM <input type="checkbox"/>				Month : Year :

*Note: Please enclose the copy of Diploma / Matriculation / STPM result

SECTION C: CO-CURRICULAR ACTIVITIES

Section C1: Club/Society/Uniform Unit i.e. Cadet Police, St. John Ambulance, Chess Club

Society/Association	Level Presented		Period (Year/Month/Section)		Position Held
	School/District College/University/State/International		Start	End	

Section C2: Sport i.e. Badminton

Sport Activity	Level Presented	Period (Year/Month/Section)		Position Held
	School/District College/ University/State/International	Start	End	

Section C3: Others i.e. National Chemistry Quiz

Awards/Activity	Level Presented	Period (Year/Month/Section)		Position Held
	School/District College/ University/State/International	Start	End	

SECTION D: FAMILY DETAILS - Please fill in the details of your father/mother and/ or guardian

Full Name of your Father/
Mother or Guardian :

Relationship : Age :

Employment Status : H/P Contact N :

Occupation : Office Contact :

Gross monthly Income : Employer :

Employer Address :

Post Code : State :

Full Name of your Father/
Mother or Guardian :

Relationship : Age :

Employment Status : H/P Contact N :

Occupation : Office Contact :

Gross monthly Income : Employer :

Employer Address :

Post Code : State :

Please fill in the details of all your immediate family members

Name	Relationship	Highest Qualification	Form of Assistance (Scholarship /)	Occupation	Age

Please write 'Not Applicable' where necessary

Please list if you have relatives working in FGV Group / FELDA / SETTLER

Name	Relationship	FGV Group / FELDA / Settler	Company/Branch/Scheme

SECTION E: DECLARATION

Are you suffered from any medical conditions (mental & physical) which requires regular or prolonged treatment?

Yes

No

if yes, please give full details

DECLARATION

I hereby declare that

- (a) I am above the age of 18 years.
- (b) I hereby certify that the particulars furnished by me are true and accurate. If offered, in the event of any misrepresentation, wilful or otherwise, this scholarship shall be revoked.
- (c) I consent to the Company using my information and documents for all purposes of my scholarship agreement with the Company.
- (d) I confirm that all information and documents provided by me is accurate and complete.
- (e) I fully understand and accept that if at any time after offered, it is found that a false declaration has been made in this form, the Company has absolute right to terminate my scholarship.

* Please tick this box if you consent to our transfer of your information provided in this Form to a third party

"Please note that we will not transfer your information provided in this Form to a third party without your consent."

Signature : _____
 Name: : _____
 NRIC No. : _____
 Date : _____