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|  | **PUSAT PEMAJUAN KOMPETENSI BAHASA**  **Kod Dokumen: BR02/EXT** |
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| **BORANG PERMOHONAN KURSUS BAHASA**  ***LANGUAGE COURSE APPLICATION FORM*** |

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| Nama / Institusi / Syarikat: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Name / Institution / Company* |
| Alamat / *Address*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Pegawai Bertanggungjawab/: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Person-in-Charge* |
| No. Telefon (Pejabat): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No. Telefon Bimbit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Phone No. (Office)* *Mobile No.* |
| Kursus Dipohon: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Course(s) Requested* |
| Intensif / *Intensive* [ \_\_\_\_\_ jam / hari (*hours / day*)] |
| Biasa / *Normal* [ \_\_\_\_\_ jam / minggu (*hours / week*)]  Tempoh Kursus / *Course Duration*: \_\_\_\_\_\_\_\_ jam / *hours*  Tarikh Mula / *Beginning Date*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Bilangan Peserta / *No. of Participants*: \_\_\_\_\_\_\_\_ |
| Tempat Kursus / *Venue*: CALC Lain-lain / *Others* (Sila nyatakan / *Please state*):    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Keperluan Lain (Jika ada):  *Other Requirements (If applicable)* |
| 1. Sijil Penyertaan (Kehadiran) / *Certificate of Attendance* |
| 1. Ujian / Penilaian / *Test or Evaluation* |
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| Kaedah Pembayaran / *Mode of payment*: |
| Tunai / *Cash* Pesanan kerajaan / *Local order* Invois / *Invoice* |
| Pelarasan antara PTJ (UPM) / UPM *Internal Transfer* |
| **Nota:** Sila serahkan satu (1) salinan bukti pembayaran kepada pihak CALC selepas pembayaran dilaksanakan.~~/~~ *Please provide us with one (1) copy of proof of payment after payment is made into UPM account.* |
| Tandatangan Pemohon:Cap rasmi (jika ada):  *Signature of Applicant: Official stamp (if any):*  Tarikh / *Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
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| **Kegunaan Pejabat / *Office Use*** |
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| Setuju Laksana Perkhidmatan  Tidak Setuju Laksana Perkhidmatan  (Sebab): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tarikh Permohonan Diterima: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Tempoh Kursus: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Penerimaan Bayaran: Tunai Cek Pindahan antara bank (EFT)  Pelarasan antara PTJ (UPM) LO  Nama Pengajar: 1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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