

REGISTRATION FORM

INTERNATIONAL ACCOUNTANCY DEGREE PROGRAMME AIA BA (HONS) IN ACCOUNTANCY

All sections of this application form must be completed, unless they are not applicable. If a section is not applicable please enter the letters N/A. Please complete all sections in English and BLOCK CAPITALS using black ink. The form must also be signed and dated in English.

Please return along with your payment, and A4 certified copies of the following documents.

1. Copy of I/C
2. Copy of each of your academic certificates

Please attach passport size photo here

OPTIONS

Please complete this section to let us know what options you wish to choose.

- Do you want the option of studying in the UK? 6 months 1 year No
- Do you want the option of gaining work experience in the UK? 6 months 1 year No
- After qualification do you want the option of studying a UK Masters' programme? Yes No

PERSONAL PARTICULARS

Note: AIA operates a policy which offers equality of opportunity regardless of gender, ethnicity, colour, disability, religion, age, sexual orientation, or marital status.

Title:	<input type="text" value="Mr Mrs Miss Ms Other (please specify)"/>
Family / Surname:	<input type="text"/>
First Name(s):	<input type="text"/>
I/C/Passport No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Matriculation No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>



PERSONAL PARTICULARS CONT.

Postal Address:

Postcode:

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City:

State:

Telephone:

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Mobile Phone:

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Email:

Date of Birth:

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Place of Birth:

Marital Status:

Gender:

Nationality:

Race:

Religion:

Do you have any health problems?

Yes

No

If yes, please specify:

Do you have a disability?

Yes

No

If yes, please specify:

ACADEMIC RECORD

1. SIJIL PELAJARAN MALAYSIA (SPM) / GCE O LEVELS

Year:

Subject:

Grade:

Subject:

Grade:

1. Bahasa Melayu

2. Mathematics

3. English

4.

5.

6.

7.

8.

9.

10.

2. SIJIL TINGGI PELAJARAN MALAYSIA (STPM) / GCE A LEVELS

Year:

Subject:

Grade:

Subject:

Grade:

1.

2.

3.

4.

5.

6.

3. MATRICULATION

Institution:

Intake:

Graduation:

Grade/CGPA:

4. DIPLOMA

Institution:

Intake:

Graduation:

Grade/CGPA:

5. BACHELOR DEGREE

Institution:

Intake:

Graduation:

Grade/CGPA:

6. OTHER

Institution:

Intake:

Graduation:

Grade/CGPA:

PARENT/GUARDIAN PARTICULARS

Title:	<input type="text" value="Mr Mrs Miss Ms Other (please specify)"/>
Family / Surname:	<input type="text"/>
First Name(s):	<input type="text"/>
I/C/Passport No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Old I/C No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Occupation:	<input type="text"/>
Monthly Income:	RM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Postal Address:	<input type="text"/>
Postcode:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
City:	<input type="text"/>
State:	<input type="text"/>
Telephone:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile Phone:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

EMERGENCY CONTACT

Title:	<input type="text" value="Mr Mrs Miss Ms Other (please specify)"/>
Family / Surname:	<input type="text"/>
First Name(s):	<input type="text"/>
Telephone:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile Phone:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Occupation:	<input type="text"/>
Relationship:	<input type="text"/>

DECLARATIONS

1. UNISEL

I hereby declare that all information stated in this form is correct and true and I understand that UNISEL has the right to revoke the programme offered or terminate my studies in UNISEL at any time if any information or certificate given is false.

Signature: Date:

2. AIA FIT AND PROPER STATUS

FINANCIAL RESPONSIBILITY AND RELIABILITY

Have you, in the last ten years, had a court judgement made against you for a debt or made a compromise arrangement with your creditors; have you ever been declared bankrupt or been subject to bankruptcy procedures; have you ever, in respect of your creditors, signed a trust deed, made an assignment for their benefit or made any arrangements for the payment of a composition to them?

Yes No

CONVICTIONS OR CIVIL LIABILITIES

Have you been found guilty of any offence; or subject to civil or court action relating to your professional business activities or your directorship or management of any company? Offences for which the conviction is spent for the purposes of the Rehabilitation of Offenders Act England and Wales 1974 (or equivalent legislation as may apply in other jurisdictions) provided that you have satisfied the conditions for rehabilitation and motoring offences that did not lead to disqualification or a prison sentence need not be mentioned. In respect of a conviction which is not spent under the Act, details are required regarding the offence, penalty imposed, the court which convicted you and the date of conviction.

Yes No

GOOD REPUTATION AND CHARACTER

Have you had any actions taken against you restricting your trade, business or profession; had any finding against you in respect of misconduct or malpractice in your business or profession; been subject to disciplinary finding against you by an employer or professional body; been refused entry to or excluded from membership of any profession or vocation; been dismissed or required to resign from any office; employment or partnership; been disciplined or publicly criticised or subject to court order by any regulatory body or officially appointed enquiry with the regulation of a financial, professional or other business activity?

Yes No

Are you currently undergoing any investigations or disciplinary procedures as described above?

Yes No

If the answer is 'Yes' to any of the questions above please provide details on a separate sheet and attach this to your application.

3. AIA CODE OF ETHICS & CONSTITUTIONAL DOCUMENTS

All AIA students are subject to AIA's code of conduct and professional ethics, and to disciplinary requirements and procedures. Please download the Code of Ethics and the Constitutional Documents from the AIA website - www.aiaworldwide.com/values-and-ethics - and ensure you read and understand them.

I hereby declare that all information stated in this form is correct and true, and I have downloaded, read and will comply with the AIA Code of Ethics and the AIA Constitutional Documents.

Signature:

Date:

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4. DATA PROTECTION

The details provided on this application form will be entered on AIA's database for administrative and regulatory use, in accordance with AIA's registration under data protection legislation. AIA does not sell mailing lists to third parties; however, it does carry out controlled mailings on behalf of third parties where the product concerned is deemed likely to be of interest to accountants.

If you do not wish to receive third party mailings please tick ✓ here

ACADEMIC RECORD UNIT

Date received:

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Complete:

Incomplete: