



ASIAN TOURISM INTERNATIONAL COLLEGE  
STRIVE FOR EXCELLENCE

**Course**

Programme

Intake

ex: Jan 2010/May 2010/Oct 2010

**Personal Particulars**

Name (as in I.C.)

Gender

NRIC / Passport

Nationality

Race

Religion

Date of Birth

Marital Status

Residential Address

Telephone No

H/P No

Email Address



ASIAN TOURISM INTERNATIONAL COLLEGE  
STRIVE FOR EXCELLENCE

Correspondence Address

**Academic Information**

Schools / Colleges / Institutions attended

Name of School / College / Institution

Year Attended

Course Completed / Qualification  
Attained

From

To

Have you enrolled at ATI  
previously?

Yes

No

If yes, please state the course  
name

From

to

**Work Experience(s)**

Company Name

Position Held

From

To



ASIAN TOURISM INTERNATIONAL COLLEGE  
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**Medical Disclosure**

Do you have any medical condition that the college ought to know? If so, please state.

In case of emergency, contact:

Name

Relation

NRIC

Telephone No.

Contact Address

**Particulars of Sponsor (If Applicable)**

Name

Relation

NRIC/Company Reg. No.

Telephone No.

Fax No.

Email



ASIAN TOURISM INTERNATIONAL COLLEGE  
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Contact Address

**Particular of Parent / Guardian as Guarantor**

Parent/Guardian Name (as in I.C.)

Occupation

House Telephone No.

Office No.

H/P No.

**Mode of Payment**

Semester payment

One lump sum payment

Others

**Declaration by Application**

I declare that the information provided by me in relation to this application is true and correct. I understand that Asian Tourism Institute reserves the right to vary or reserve any decision regarding admission or enrolment made on the basis of incorrect or incomplete information. I, the Applicant, agree to abide by all academic and administrative regulations applying to the course I am applying.



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STRIVE FOR EXCELLENCE

**Please submit your application form to:-**

Asian Tourism International College

Lot 26, Jalan Lorong Dewan

88000 Kota Kinabalu, Sabah

Malaysia

Tel : 088-253731, 253732

Email: [atism@ati.edu.my](mailto:atism@ati.edu.my)