

MN Education Counselling Group - Personal Details Form

Student's Details					
Full Name (as in your passport)	Khairul Firdaws Mohamed				
Passport Number	B4536354	Date of Birth (Day/Month/Year)	12.06.1980		
Mobile	006017283647345	Telephone	00603902275648		
Email	khairul@gmail.com & khairul_2008@yahoo.com				
Parent's Details (Father Or Mother)					
Full Name	Ibrahim shams	Passport Number	H7563736272		
Phone Number	0060174638477 (Watts App & Viber)	Email	Shams.ib@gmail.com		
Full address of Student (Compulsory for Immigration)					
House Number	45.23	Street	Peramlee street	Avenue	Putra avenue
Area	Cheras selatan	City	Kuala lumpure	Province	Selangor
Post Code	5764000	Country	Malaysia		
Educational Background					
Level of Study	Start date (DD/MM/YYYY)	End Date (DD/MM/YYYY)	Field of study	Country	Grade
High school	01.01.2000	01.05.2003	Science	Malaysia	70%
Pre-University					
Associated degree					
Bachelor	05.01.2012	10.06.2016	Electronics engineering	Malaysia	3.4 out of 4
Master	12.12.2016	01.05.2017	Robotics and mechatronics	Malaysia	3.2 out of 4
PHD					
Which course and university you want to apply in Malaysia					
Name of the University or institute		Name of the Program		Level (bachelor ,Master , PhD , English Course)	
UPM		Electrical and Electronics Engineering		PHD	
UKM		Robotic engineering		PHD	
Work Experience 1	Position 1	Job Description 1			
	Project Manager	Managing the power station and electrical engineering in the company			
	Start Date (DD/MM/YYYY) 1	01.05.2015	End Date (DD/MM/YYYY) 1	01.12.2016	
	Name, Address & Telephone Number of company 1				
	Ayamo Company, No 12, Tun razagh Street, Kuala Lumpure, Malaysia . Phone: 006037587485748				
Work Experience 2	Position 2	Job Description 2			
	Teacher	Teaching Electronics and Control			
	Start Date (DD/MM/YYYY) 2	01.01.2015	End Date (DD/MM/YYYY) 2	01.01.2015	
	Name, Address & Telephone Number of company 2				
	Technical college of engineering, NO 15. Shikao Street, Kuala lumpure , Malaysia, Phone 0060273647582				
Work Experience 3	Position 3	Job Description 3			
	Start Date (DD/MM/YYYY) 3		End Date (DD/MM/YYYY) 3		
	Name, Address & Telephone Number of company 3				

Note1: Please fill in all the white color fields of this form (Size 8) in your computer then send it to our email.

Note2: if your working experiences are more than 3 you can write with the requested details on next page.