

YOUR FUTURE our support

Are you an undergraduate in:

- Engineering (Electrical, Mechanical, Manufacturing, Mechatronics)
- IT / Computer Science / Software Engineering / Data Science
- Accounting / Business / Management

SCAN TO APPLY NOW!



Who should apply?

- Malaysian, full-time Bachelor's student (IPTA/IPTS)
- 6As in SPM /CGPA3.0 above /MUET minimun Band 4
- Priority for families earning RM5,000 or less

PER ANNUM



Interested? Connect with us at:

03-6145 8378 (Syud)

03-6145 8632 (Kay)

03-6145 8616 (Afidza)



APPLY BY:

15th of November 2025

daikin.scholarship@daikin.com.my



DAIKIN MALAYSIA GROUP SCHOLARSHIP PROGRAM 2025

1. Eligibility Criteria:

- a. Malaysian citizen.
- b. Full-time student pursuing a Bachelor's Degree at a Malaysian university (priority given to IPTA, followed by IPTS)
- c. Possess good academic results:
 - i. Students who will enroll into 1st year degree program
 - SPM or equivalent: Minimum 6As + pass all subjects, with good results in Mathematics, English, and Bahasa Malaysia.
 - STPM/Pre-University/Local Matriculation/Diploma/Foundation: Minimum
 CGPA 3.00 & above.
 - MUET: Minimum Band 4.

ii. Students currently pursuing 1st year degree program

- SPM or equivalent: Minimum 6As + passes in all subjects, with good results in Mathematics, English, and Bahasa Malaysia.
- STPM or equivalent: Minimum 2As + passes in all subjects.
- MUET: Minimum Band 4.
- Minimum GPA or CGPA: 3.00 & above.
- d. Active participation in co-curricular activities and demonstrated leadership.
- e. Have not received other financial aid from any organization
- f. Scholars who are free from any future employment obligations
- g. Students who meet the above criteria (a to g) are welcome to apply. Preference will be given to students from families with a household income of RM5,000 per month or below.

2. Eligible Courses:

Bachelor's Degree in:

- a. Engineering (Preferably in Electrical & Electronics, Mechanical, Manufacturing, Mechatronics)
- b. IT/Computer Science/Software Engineering/Data Science/Data Analytics
- c. Accounting
- d. Business/Management

3. Scholar's Obligations:

- a. Serves a bond with company offering the scholarship for a minimum of duration sponsor.
- b. The bond will start immediately upon completion of degree course with the appointment letter given within 3 months period.



- c. Scholar will be required to work in the sponsor company or any subsidiary companies within Daikin Malaysia Group.
- d. Perform internship in the sponsor company or at any subsidiary within Daikin Malaysia Group during semester breaks.
- e. Scholar shall reimburse 100% of the scholarship fees should he/she resign from the company or is terminated during the bond period.

4. How to apply:

- a. Download the application form from https://www.daikinmalaysia.com/career/scholarship-program/
- b. Submit applications by 15th November 2025.
- c. Submit via:
 - Softcopy: Email to <u>daikin.scholarship@daikin.com.my</u> (PDF format).
 or
 - Hardcopy: Send to:

Attention: Ms. Farah Syuhada Binti Mohd Rosli / Ms. Nurul Afidza Binti Ismail/
Ms. Kay Lee Yen Hui / Ms. Chong Pui Theng
(Human Resources Department)

DAIKIN MALAYSIA SDN. BHD.

Lot 60334, Persiaran Bukit Rahman Putra 3, Taman Perindustrian Bukit Rahman Putra, 47000 Sungai Buloh, Selangor D.E. Malaysia.

Download Application Form as Below:

- Daikin Malaysia Group Scholarship Program 2025 Application Form (Excel).
- Daikin Malaysia Group Scholarship Program 2025 Application Form (PDF).

5. Selection Process:

- a. Shortlisted candidate will be notified within 2 weeks after the application deadline.
- b. Final selection will be based on interview results.

*Note: Applications will not be processed if:

- a. Documents are incomplete.
- b. Candidates do not meet the criteria at para 1.
- c. Applications are received after the deadline.



6. Scholarship Amount:

• RM15,000 per annum for 1 scholar

7. For Inquiries:

- Email to <u>daikin.scholarship@daikin.com.my</u>
- Contact us:
 - Ms. Nurul Afidza Binti Ismail (03-6145 8616)
 - Ms. Farah Syuhada Binti Mohd Rosli (03-6145 8378)
 - Ms. Kay Lee Yen Hui (603-6145 8632)
 - Ms. Chong Pui Theng (603-6145 8603)

DAIKIN MALAYSIA GROUP SCHOLARSHIP PROGRAM CHECK LIST

Full Name of Applicant (as per I/C):	
Contact Number 1) H/P No. :	
2) Home Tel No. :	
Email Address :	

Please attach this $\mathbf{CHECKLIST}$ as the front page together with other documents in the following order:

- a Check List
- b Scholarship Application Form
- c Supporting Documents Listed As Follows:

Have you submitted the following documents?

Please tick ($\sqrt{}$)

1	Application Form							
2	Identity Card - Photocopy							
3	University Enrollment/Acceptance Confirmation Letter - Photocopy							
4	Academic Calendar (for the degree courses) - Photocopy							
5	Statement of Course Fees from Bursar of University - Photocopy							
	Academic result (Photocopy):							
	*A.) University Academic Result (Only applicable for first year student)							
6	B.) SPM/ SPMV							
	C.) STPM/ Matriculation/ 'A' Level/ UEC/ Foundation/ 'O' Level							
	D.) MUET/IELTS/1119/TOEFL							
7	Certificates of Co-Curriculum Activities photocopy							
	Others (if any)							
8	Please state:							
8								

Kindly ensure all required documents are attached.

Incomplete documents submission might not be processed.



DAIKIN MALAYSIA GROUP SCHOLARSHIP PROGRAM APPLICATION FORM

PASSPORT SIZE PHOTO

					Per	sonal	Details						
Full Name (as per	Full Name (as per IC)						Marital Status						\neg
NRIC No.						=	Mobile N						
						=	Widdle No						
Email Address													
Residential Address													
Post code: State:													
					University	/ Coll	lege Education						
University / College	Name		:										
Course Name			:										
Course Duration (M	IM/YYYY-MN	1/Y	YYY . :										
Current Year & Ser	mester		:										
					Fa	mily l	Details						
	Fa	the	r						M	other			
Full Name							ull Name						
(as per IC) NRIC No.							s per IC) RIC No.						
Age	Come on obove		г —			A	ge	Come as al	hove [1			
	Same as above If not, please indicate below:						Same as above If not, please indicate below:						
Residential	if not, prease marcure below.						esidential	J, p					
Address						— A	Address						
	Post code:		Sta	ate:		-		Post code:			State:		
Mobile No						М	lobile No						
House Phone No						н	ouse Phone No						
Employment Status	Working / Not W	Vorking / Retired			F.	mployment Status	Working /	Working / Not Working / Retired					
Employment Status	(If "Working", ple	lease specify below)					(If "Working", please specify below)						
Occupation							ccupation						
Name of Employer						Na	ame of Employer						
Address of Employer					A	ddress of Employer							
	Telephone No							Telephone	No				
	Fax No							Fax no]			
3(a) Household In	come Per Mont	h : 1	RM										
3(b) Annual Gross	Income of Par	ents	(Latest Y	Year)									
Types of Income					Father (RN	M)				Moth	er (RM)		
Employment													
Business													
Rental													
Others													
Total													

3	(c) Family Expenditur	e											
Т	ypes of Expenditure								Month	ly (RM)			
Н	Iouse Installment / Renta	1											
F	ood												
Е	lectricity / Water												
Т	elephone												
L	oan Repayment (car / mo	otor-bike /	appliance	es / etc)									
Т	ransportation												
	ducation												
О	Others (Please specify:)												
L		1	Total										
					Sibli	ings In	formatio	n					
	Full Name Age Gender			Marital		al Occupation/ Company / S				N	Monthly (if wo	onthly Income (if working)	
ŀ													
H	las/have any of your sib	olings(s) c	urrently/	previously re	eceived any	y Schol	arship?				Yes		No
If	YES, please state the fo	llowing:											
	Full Name		Nan	ne of Organiz	zation / Ins	titutio	n	Course	Name	Total An Per Ann			se Duration Years)
F													
-													
P	hysically Challenged Fa		mbers (d										
F	Full Nar	ne		Age	Rela	tionshi	ip	III	ness/Impairs			Duratio	on
ľ													
1													

	Do you have any siblings / relatives If yes, please give the details:							
	Name (as per IC)	Name (as per IC) Contact No. Relationship Name of Company					Position	Years of services
								scrvices
		Extra-Curri				ol Onwards)		
	**List positions held in Associations							
8	No Associations / Socie	eties / Club / Sport		From (Y	(ear)	To (Year	P(osition Held
	1							
	2							
	3							
	4							
	5							
		Av	vards (Secon	dary Scho	ol Onward	s)		
9	No Award(s) a	nd Details		,	Year		Levels / C	
	1	nu Deuns			1 (11		Develo / C	
	2							
	3							
	4							
	5							
	<u> </u>		Medic	al Conditi	ons			
	5			al Conditi	ons			
10	10(a) Any physical disability (e.g. sig			al Conditi	ons			
10	5			al Conditi	ons			
	10(a) Any physical disability (e.g. sig	state:)?		ons -			
	10(a) Any physical disability (e.g. sig YES Please NO 10(b) Please quote Disabled (OKU) Io	state:dentification Card n)?		ons			
	10(a) Any physical disability (e.g. sig	state:dentification Card n)?		ons -			
	10(a) Any physical disability (e.g. sig YES Please NO 10(b) Please quote Disabled (OKU) Identification 10(c) Any previous illness / surgery? YES Please	state: dentification Card n Card number:)?		ons			
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11	10(a) Any physical disability (e.g. sig YES Please NO Disabled (OKU) Identification 10(c) Any previous illness / surgery? YES Please NO Please NO Please NO Please NO Please NO No Please NO No Please NO Disabled Company	state: dentification Card n Card number : state: Position S. PREFERABLY	Worki Date J From	applicable): age Experie foined To Referees FURER(S) / Chievements	- Last Di	(S)	Reason	

	Others										
13	13(a) Were you a scholarship recipient before? YES NO										
	13(b) Are you RECEIVING any financial assistance or sponsorship from other organization/institution/fund/foundation? YES NO										
	If YES, please give details:										
	Institution/Fund/Organization/Foundation (e.g. JPA, MARA, PETRONAS, PTPTN, etc.)	Duration of From	Sponsorship To	Amount Per Annu (RM)		nd Period if any)					
	1	From	10	, ,							
	2										
	3										
	13(c) Are you currently APPLYING any financial assistance or sponsorship from other organization.	anization/institut	ion/fund/founda	tion? Y	ES	NO					
	If YES, please give details:	I		<u> </u>		1					
	Institution/Fund/Organization/Foundation (e.g. JPA, MARA, PETRONAS, PTPTN, etc.)	From	Sponsorship To	Amount Per Annu (RM)		nd Period if any)					
	1										
	2										
	3										
13(d)	Have you applied for Daikin Malaysia Group scholarship before?			Y	ES	NO					
13(e)	Were you the recipient of the Daikin Malaysia Group scholarship before?			Y	ES	NO					
13(f)	Are you willing to serve an employment bond within any subsidiaries of Daikin Mal of studies?	aysia Group up	on successful	completion	ES	NO					
13(g)	Are you willing to be an intern student under any subsidiaries of Daikin Malaysia G	roup during sen	nester break?	Y	ES	NO					
	Brief Explanati	on									
14	Tell us why are you interested in getting the Daikin Scholarship? (in not more t		s)								
	Declaration										
	Declaration of Applicant										
	I hereby declare that the information given in this application form is complete, true and accurate. I understand that any information given falsely or withheld will affect the decision of my application, and may result in my ineligibility for the scholarship award. I understand that any misrepresentation of facts herein will be sufficient cause for the company to terminate the scholarship received by me.										
	Name: IC No: Date:										