## **Application for Courses, Examinations or Task Assessments**

(External Candidates) (Please print clearly in BLOCK capitals)



A. PERSONAL DETAILS  Full Name (as in Identity Card/Passport):  I/C / Passport No.:						
MUHAMMAD ASPIN BIN NOHD ARIS 910910-14-5915						
B. APPLYING FOR Course:						
DCAM Part-66 Licence Category: [	A1	A3	В	31.1 <u> </u>	B1.3	B2
DCAM Part-66 Module Examination:						
1 2	] 3	<u> </u>	Ø 5		6 🔲	7 MCQ
7 Essay 8	9 MCQ	9 Essay	<u> </u>	0 MCQ	10 Essay	11A
12 13 [	<b>1</b> 4	<u> </u>		7		
Task Assessments (State the Reference No.):						
DCAM Part-66 Removal of Limitations						
1 B1 1 B2[	2	<u></u> 3	□ 4		5 🔲	6
9 10	11	13		4 🔲	16	17
Have you been unsuccessful in the requested DCAM module/s, removal of limitation examination/s or task assessment/s before: YES NO If YES, please state the date/s of the last attempt:						
C. DISCLAIMER						
DTS shall ensure that the collection, use and disclosure of personal data in this form are in compliance with the Malaysian Personal Data Protection Act 2010 (Act 709). Personal data collected and processed in this form is obtained voluntarily and with your consent. DTS will only use personal information for the purpose for which it was provided and such information will not be used for any other purpose without prior consent of the information provider.						
DTS shall not be held liable for any reparation caused as a result of the collection, use, disclosure, loss, misuse, modification, unauthorised or accidental access, alteration or destruction of personal data, unless such were due to deliberate and/or gross negligence on DTS' part.						
D. DECLARATION						
I declare that should any application relate to a re-sitting of examinations, the period moratorium requirement of more than 90 days from the last attempt has been met.						
I understand that DTS reserves the right to reject or withdraw this application at any time should any statements or evidence provided be found incorrect or false.						
Candidate's Signature:				Date	e:	
4	7				23/9/20	019
E. OFFICE USE						
Accepted by (name and signature):			one assessment and assessment of a	Date	manya paramanan kaban kata bada	