

(C) 财务状况 Financial Conditions:

指定银行与户口号码 Bank Acc. No. : _____

指定银行户口持有人姓名及身份证号码 Bank Acc. Holder's Name & I/C No: _____

房屋贷款 House Loan: RM _____ 汽车贷款 Car Loan: RM _____

房屋租金 House Rental: RM _____ 其他 Other: RM _____

(D) 今年内其他团体给予赞助 Financial Source Aid From Other Society(current year):

团体名称 Society	援助金额 Donation Amount	备注 Remark
社会保险 (Socso)		

你是否曾经申请过柔佛古庙关怀基金会的医药补助金? 若有, 请说明年份

Have you ever applied for Johor Temple Foundation medical aids? If yes, please state the year

有 Yes [] _____ 没有 No [] _____

本人同意所有提呈之文件, 无论此项申请批准与否, 交由基金会全权处理及保管 (恕不退还)。为配合基金会的需要, 本人同意基金会公开此申请资料。

I agree with all proposed documents, regardless to the approval or not for this application by the Foundation to hand in dealing with custody (non-refundable). In order to meet the needs of the Foundation, I agree that the Foundation reserves the right to make public of this application.

申请者签名 Applicant Signature

日期 Date: _____

备注: 申请者须承担一切因提供错误与误导性资料的后果。

Note: The applicant shall bear all the consequences of providing false and misleading information.

推荐人/团体签盖 Recommended by: _____

附件 Attachment:

1. 身份证副本 I/C Copy
2. 薪水单 (正本) Payroll Sheet
3. 医生证明书或医药报告书或治疗处证明书副本
Medical certificate or medical report or treatment unit certificate (copy)
4. 生活照 Photographs of life
5. 推荐信或介绍函 (如有) A letter of recommendation or introduction letter (if any)
6. 水电单副本 Water bill and electricity bill copy
7. 家属/孩子的工作资料, 薪水单等