

## Terms and Conditions of Award under the Malaysian Technical Cooperation Programme (MTCp)

### General Conditions of Award:

- a) Participants shall conduct themselves at all times in a manner compatible with their responsibilities as MTCp scholarship holders and abide by the laws, rule of the General Conditions of Award. This scholarship shall not be rendered concurrently with any other scholarship award.
- b) The dress code is office attire. The room might get a bit cold, so please bring along a jacket. Provocative clothes (such as sleeveless dress/shirts) are NOT allowed.
- c) Participants are not allowed to participate in any political and/or commercial activities in any capacity whatsoever. Participants shall not take up paid employment during the tenure of their scholarship or serve as a staff at their Official Representative Offices in Malaysia.
- d) Participants are NOT allowed to bring along their spouses or families for the duration of the course. Participants will be required to return to their own countries upon completion of the course or at the end of the tenure of the scholarship, whichever is earlier.
- e) The award may be terminated at any time due to unsatisfactory conduct, breach of the conditions of the award, failure to make satisfactory progress or as deemed necessary by the Malaysian training institution.
- f) Participants who are found to be medically unfit during the course of the programme will be required to return to their country. Participants are also required to abide by the following:
  - i. To observe the course schedule;
  - ii. To obey instructions and abide by conditions stipulated by the Malaysian training institution or government agency with respect to the training.

**CLOSING DATE: 17 MARCH 2015**

### CONTACTS:

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MALAYSIA

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**BANK NEGARA MALAYSIA**  
CENTRAL BANK OF MALAYSIA



**Malaysian Technical  
Cooperation  
Programme  
2015**

**Workshop on  
Capital Adequacy  
Requirements for  
Islamic Banks**

**20 - 24 APRIL 2015**  
**Sasana Kijang, Kuala Lumpur**

## MALAYSIAN TECHNICAL COOPERATION PROGRAMME (MTCP)

In line with the spirit of South-South cooperation, Malaysia has implemented the Malaysian Technical Cooperation Programme (MTCP) since 1980. This programme stands as proof of the commitment of the Government of Malaysia towards the promotion of technical cooperation among developing countries, offering support in areas where Malaysia has the experience and expertise. The MTCP forms part of the strategy and commitment of the Malaysian Government to the promotion of technical cooperation among developing countries, strengthening of regional and sub-regional co-operation, and nurturing of a collective self-reliance among developing countries. The programme was formulated based on the belief that the development of a country depends on the quality of its human resources through training and provides a platform for the sharing of information and experience.

### HOW TO APPLY?

- ✓ Applications should be made using the online forms at [http://mtcp.kln.gov.my/download/cat\\_view/63-application-forms](http://mtcp.kln.gov.my/download/cat_view/63-application-forms)
- ✓ Application must be endorsed by the Ministry of Foreign Affairs or the relevant agency responsible for the MTCP Programme in applicant's country, and submitted through the respective Ministry of Foreign Affairs

### INCOMPLETE AND/OR UNENDORSED FORMS WILL NOT BE PROCESSED

- ✓ Submitted application form must be accompanied by the applicant's medical report and a clear copy of his/her passport
- ✓ Applicants will be notified of their acceptance to the course either through the Malaysian Embassies, Malaysian Focal Point or Bank Negara Malaysia (BNM)

### APPLICATION

Successful applicants will be provided with the following:

- ✓ Return flight ticket (Except for countries with GDP per capita exceeding USD5,000)
- ✓ Accommodation and Meals
- ✓ Subsistence Allowance

## DESCRIPTION AND OBJECTIVES

This workshop is specifically designed to benefit countries which have Islamic banks established in their market.

At end of programme, participants will be able to:

- ✓ Describe capital adequacy requirements of Islamic banks in comparison with conventional banks
- ✓ Identify approaches and strategies to comply with capital adequacy requirements for Islamic banks
- ✓ Discuss issues and potential challenges with regard to capital adequacy requirements for Islamic banks

### WORKSHOP COVERAGE

- ✓ Capital Adequacy Framework for Islamic Banks in Malaysia

- ✓ Approaches adopted in developing and implementing capital framework for Islamic banks in Malaysia

- ✓ Assessment on capital adequacy under Risk Based Supervision in Malaysia

- ✓ ICAAP and Supervisory Review Process

### TARGET PARTICIPANTS

- ✓ Officers involved in the formulation of policy or supervision of Islamic banks. These include policy makers, risk managers and bank supervisors of central banks and/or financial regulatory agencies
- ✓ The maximum number of participants is limited to 40; selection will be based on the relevancy of applicant's job scope to the objective of the programme

- ✓ Aged between 26 – 50 years old

- ✓ Able to read, write and converse in English

## OTHER INFORMATION

- ✓ Participants to ensure that they have a valid passport (minimum 12 months validity beyond the programme dates) and all visa requirements are in order.
- ✓ Participants are advised to bring enough money to cover initial expenses on departure from the home country, as allowances will only be paid after your arrival in Malaysia.
- ✓ All participants are required to enter Malaysia with Visa with Reference (VDR).
- ✓ A Yellow Fever Vaccination Certificate is required for participants coming from or has passed through The Yellow Fever Endemic Zones/Countries. Participants must get their vaccination at least 10 days before departure.
- ✓ Expenditures on all visa-related fees, vaccination before travel to Malaysia, airport tax/airport user's charge, transit insurance, excess luggage, travel tax, transit fees, phone charges, private purchases are borne by the recipients.



Please affix  
passport  
photograph

## APPLICATION FORM

### SHORT TERM COURSE IN MALAYSIA UNDER THE MALAYSIAN TECHNICAL COOPERATION PROGRAMME ( MTCP )

Please type or write clearly in capital letters. Do not leave  
any space blank. Use "NIL" or "N/A" where applicable

### FOR OFFICIAL USE ONLY

Reference no : \_\_\_\_\_  
Received : \_\_\_\_\_  
Checked : \_\_\_\_\_

<b>TITLE OF COURSE:</b>	Date of commencement:
<b>NAME OF IMPLEMENTING AGENCY :</b>	

### 1. PERSONAL DATA

Family Name (surname) :	Date of birth : Day   Month   Year
First Name :	Nationality ( citizenship ) :
Other Names :	Gender : Male / Female #
City and country of birth :	Marital status : Single / Married #
Passport No :	Religion :

# Delete accordingly

### 2. COMMUNICATION AND MAILING ADDRESS

Applicant's Office Address :		Applicant's Postal / Home Address :	
		Home telephone   Country   Area   Number	
Office telephone Country   Area   Number	Telefax Country   Area   Number	Email	
Person to be contacted <b>in case of emergency</b> :			
Name : _____		Mobile Phone Number: _____	
Telephone : _____		_____	
Address : _____		_____	
Email : _____		_____	

**NOTE :** This application form should be duly completed and endorsed by the Ministry of Foreign Affairs  
or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or  
not endorsed will not be accepted

**3. EDUCATION (list in order of time, starting with last institution attended)**

Name of institution and place of study	Major field of study	Years of study : from - to	Degree

**4. EMPLOYMENT RECORD**

<b>A. Present or most recent post</b>	<b>B. Previous post</b>
Employer :	Employer :
Years of service ( from – to ) :	Years of service (from – to) :
Title of your post/position :	Title of your post/position :
Present salary per month (US Dollars) :	Salary per month (US Dollars) :
Name of supervisor and title :	Name of supervisor and title :
Type of organization : Government / Semi Government / Private / NGO #	Type of organization Government / Semi Government / Private / NGO #
Main functions of organization :	Main functions of organization :
Total number of employees :	Total number of employees :

# Delete accordingly

Description of your work including your responsibility :

Please continue on supplementary pages if necessary

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

## 5. REASONS FOR APPLYING THIS COURSE

Please state briefly the reasons for applying to this course and how you hope to benefit from the programme.

Please continue on supplementary pages if necessary

Have you participated in any training programme in Malaysia before? : YES / No #

Name of programme

Organizer

Year

Have you participated in any MTCP training programme in Malaysia before? : YES / NO #

Name of Course

Name of Training Institute

Year

# Delete accordingly

## 6. ENGLISH LANGUAGE PROFICIENCY (Kindly provide certificate as proof of proficiency)

	Excellent	Good	Fair	Basic	Remarks
Listening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Mother tongue : \_\_\_\_\_

Language test administered by : \_\_\_\_\_

Title : \_\_\_\_\_

Address : \_\_\_\_\_

Tel Number : \_\_\_\_\_

E mail : \_\_\_\_\_

Date and signature : \_\_\_\_\_

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

**7. MEDICAL REPORT (to be completed by an authorized physician)**

Name of Applicant:			
Age:	Sex:	Height:                      cm	Weight:                      kg
<b>Blood Pressure:</b>			
Blood Group: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> AB <input type="checkbox"/> O <input type="checkbox"/> Other (       )			
Is the person examined at present in good health?		Is the person examined physically and mentally able to carry out intensive training away from home?	
Is the person free of infectious diseases (AIDS, tuberculosis, trachoma, skin diseases etc.)?		Does the person examined have any condition or defect (including teeth) which might require treatment during the course?	
List any abnormalities indicated in the chest X ray.		Pregnancy Test ( for women ):	
I certify that the applicant is medically fit to undertake a course in Malaysia.  Name of Physician                      : _____  Address of Clinic                      : _____ (printed) _____  Telephone                                : _____ (printed) _____ Email                                        : _____ Date : _____  Signature of Physician                : _____ Seal of Clinic : _____			

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

## 8. APPLICANT'S DECLARATION

I, \_\_\_\_\_ of \_\_\_\_\_  
Name of applicant Representing Country

Declare that:

- a) All information provided is true, complete and accurate to the best of my belief and knowledge, and that I have not wilfully suppressed any material facts;
- b) I am medically fit and free from any medical problems which may impair my ability to attend and complete the training in Malaysia;
- c) I will be personally liable for **all** medical expenses due to pre-existing conditions/illnesses incurred during my stay in Malaysia after my admission to any Malaysian government hospitals/clinics, and also other than those covered under the Group Personal Accident Insurance. (All successful participants are covered under Group Personal Accident. The Group Personal Accident does **not** cover any pre-existing conditions/illnesses or any outpatient medical/dental treatment. Participants are personally liable for medical expenses beyond what is covered by the insurance policy. **As the coverage is limited, participants are advised to make their own arrangements to obtain adequate medical insurance coverage for their stay in Malaysia;** and
- d) For pregnant female applicants only: I am \_\_\_\_\_ months pregnant and am/am not certified by a qualified doctor to be medically fit and in good health to travel and attend the training in Malaysia

Upon successful selection for the training award, I undertake to:

- a) carry out instructions and abide by such terms and conditions as may be stipulated by the nominating and host governments in respect of this training course;
- b) abide by the rules and regulations of the training institution in which I undertake to study in or be trained under;
- c) submit/present any report which may be required;
- d) refrain from engaging in political activities and any form of employment for profit or gain;
- e) return to my home country upon completion of the training; and
- f) discontinue the course should I be found guilty of misconduct or be medically unfit.

I fully understand that if I fail to comply with the terms and conditions of the training award, and/or any of the above declarations are found to be untrue, the award will be terminated with immediate effect and I will be liable to depart from Malaysia at my own expense.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of applicant

9. TO: GOVERNMENT OF MALAYSIA

LETTER OF INDEMNITY

I \_\_\_\_\_, Passport Number: \_\_\_\_\_ having an address at \_\_\_\_\_, hereby declare that I shall be personally liable for and shall indemnify the Government of Malaysia and \_\_\_\_\_ against all liabilities, claims, losses, demands, actions, suits, proceedings, costs or expenses, in part/total, whatsoever arising under the laws of Malaysia or common law which may be made or taken against the Government of Malaysia and/or \_\_\_\_\_ or incurred or become payable by the Government of Malaysia and/or \_\_\_\_\_ in respect of any of any medical illness, personal injury (whether fatal or otherwise), or the death of any person, by reason of my carelessness, negligence, omission or default, in the course of my training with \_\_\_\_\_ which is appointed by the Government of Malaysia.

Dated this \_\_\_\_\_ day \_\_\_\_\_ of 20\_\_\_\_

Signature of applicant )  
Name of applicant )  
Date )

In the presence of  
Signature of Witness )  
Name of Witness )  
Designation of Witness )  
I/C or Passport No. )

**10. TO BE COMPLETED BY THE NOMINATING GOVERNMENT**

Reasons for applicant's selection

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The post which the applicant will be required to fill upon satisfactory completion of training

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Relevance of the course to applicant's job

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**11. TO BE COMPLETED BY THE NOMINATING GOVERNMENT**

**OFFICIAL DECLARATION**

On behalf of the Government of \_\_\_\_\_, I \_\_\_\_\_  
Country Name of Official

Certify that :

- a) I have examined the educational, professional or other certificates quoted by the applicant in this form and I am satisfied that they are authentic and relate to the applicant
- b) The applicant is medically fit and free from infectious disease and that, having regard to his/her physical and mental history, there is no reason to suppose that the applicant is other than fit to undertake the journey to Malaysia and to remain in Malaysia for the duration of training;
- c) Should the nominee seek medical consultation/treatment for his/her pre-existing conditions/illnesses during his period of stay in Malaysia, he would be personally liable for all medical expenses incurred, other than those covered under the Group Personal Accident Insurance; and
- d) The applicant has attained a level of proficiency in both spoken and written English to enable him/her to follow the course of study/training for which he/she is being nominated.

I nominate ( Dr/Mr/Mrs/Ms\* ) \_\_\_\_\_ holding Passport No.: \_\_\_\_\_  
for the training course.

\_\_\_\_\_  
Name and Designation

\_\_\_\_\_  
Signature and Official Stamp

\_\_\_\_\_  
Name and Organisation

\_\_\_\_\_  
Country code Area code Office tel no.

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Country code Area code Office tel no.

Endorsement by the nominating country's Ministry of Foreign Affairs or the National Focal Point for Technical Assistance:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email Address

( Ministry's Official Stamp )

\_\_\_\_\_  
Designation

\_\_\_\_\_  
Name of Organisation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Country code Area code Office tel no.

\_\_\_\_\_  
Country code Area code Office tel no.