



## ALLOWANCE CLAIM FORM

This form must be certified by the Manager / Head of Department and send to us by **END OF EVERY MONTH** throughout the period of internship. **Please make copies at your end.**

### 1. DETAILS OF INTERN

Name : Muhammad Alif Bin Masrul Nizam  
Mobile Phone. No : 017-7649362 IC Number: 021104-14-0183  
Department : Digital Banking  
Period / dates to claim : From 01/08/2023 to 31/08/2023  
Maybank Account No : 

1	6	2	2	6	3	7	3	1	7	7	0
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### 2. TRAINING DAYS


Total no. of days as per period of claim 31  
(-)  
\* Medical Leave - Date(s) : - No. of day(s) : -  
\* Leave Taken - Date(s) : 28/08/2023 No. of day(s) : 1  
Rest Days (Sat & Sun) - Date(s) : 5,6,12,13,19,20,26,27 No. of day(s) : 8  
Public Holidays - Date(s) : 31/08/2023 No. of day(s) : 1  
Total no. of actual working days = 21 + 1 (Day paid leave) = 22

Total pay as per working days @ RM50 per day = RM 

1100
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**\*Kindly attach the copy of the necessary forms i.e. Medical Certificate, Leave Form etc. verified by immediate supervisor.**

### 3. WE CERTIFY THAT THE ABOVE DETAILS ARE CORRECT

Signature :   
Name of Manager : Rizwan Mohammed Sheikh Designation : Head Digital Engineering  
\*Cost Centre & GL : 383\_88411 (del & Ops DB) Date : 29-Aug-23

Upon completion, kindly submit the allowance claim form to us via email to [asyahmi.mn@maybank.com](mailto:asyahmi.mn@maybank.com) to be delivered personally or by express delivery (Courier Service) to the following address:

GROUP RESOURCING, GROUP HUMAN CAPITAL  
44<sup>TH</sup> FLOOR, MENARA MAYBANK  
100, JALAN TUN PERAK, 50050 KUALA LUMPUR  
(ATTN: MR. AHMAD SYAHMI BIN MD NASIR)

**Note:** Submission of "Allowance Claim Form" must be **1 week before cut-off date (3<sup>rd</sup>, 10<sup>th</sup>, 16<sup>th</sup>, 25<sup>th</sup> of respective month).**  
The payment date are 7<sup>th</sup>, 14<sup>th</sup>, 22<sup>th</sup>, and end of respective month. **It's compulsory to provide Cost Centre & GL.**