

## 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	:	83						
	Department	:	Digital Banking						
	Period / dates to claim	:	From 01/09/2023	to _30/	/09/2023				
	Maybank Account No		: 1 6 2 2	6 3 7 3	1 7	7 0	]		
2.	TRAINING DAYS								
	Total no. of days as pe	r period	of claim						
	(-)								
	* Medical Leave - Date(s):No. of day(s):								
	* Leave Taken	- Date(s	s): 01/09/2023, 25/	<u>09/2023</u> No	o. of day(s)	:2	_		
	Rest Days (Sat & Sun) - Date(s): 2,3,9,10,16,17,23,24,30 No. of day(s): 9								
	Public Holidays	- Date(	s): 28/09/2023		o. of day(s)		_		
			Total no. of actual wo	orking days	= 18	+ 2 (Day Paid L	eave) = 20		
*Kindly at	Total pay as per workir			= rtificate, Leave	RM Form etc.	1000 verified by	immediate		
supervisor 3.	r. WE CERTIFY THAT THE	E ABOVE	DETAILS ARE CORRECT	г					
-	Signature	:	Bizwer.	<del>-</del> 					
	Name of Manager	:	Rizwan Mohammed She	ikh Designa	ation :	: <u>Head D</u>	Digital Engineerin		
	*Cost Centre & GL	:	383_88411 (del & Ops D	Date		<u>26/09/</u>	2023		
Upon com	pletion, kindly submit the	e allowar	nce claim form to us via	a email to <u>asyahr</u>	mi.mn@may	<u>/bank.com</u> to	be		
delivered	personally or by express (	delivery	(Courier Service) to the	e following addre	ess:				
		GROUP	RESOURCING, GROUP H	HUMAN CAPITAL					
		44 <sup>TH</sup> Fl	OOR, MENARA MAYBAN	IK					
			LAN TUN PERAK, 50050						
		(ATTN:	MR. AHMAD SYAHMI BIN	N MD NASIR)					
Nota: Sub	mission of "Allowansa Clair	n Form" i	must had waak bafara s	out off data (3rd	10th 14th *	Eth of rospor	stive menth)		

The payment date are 7<sup>th</sup>, 14<sup>th</sup>, 22th, and end of respective month. <u>It's compulsory to provide Cost Centre & GL.</u>



## APPLICATION LEAVE FOR INTERNSHIP

Branch/Department			Delivery & Ops Digital Banking, Group Technology			Date :	29/08/2023	
Name			. Muhammad Alif Bin Masrul Nizam			PF No. /Ref No.:	: 00152153	
Internship Period : 9			: Start Date: <u>10/0</u>	7/2023 End Date: _				
Nature o	of Leave:	<b>V</b>	Please tick whiche	ever applicable.				
		/	Annual <b>NOTE</b>		g to for the Bank t	may want to indicate to extend possible	ate the location/city assistance in the	
				Country:	City:			
			Compassionate	,	,			
			Marriage					
	Number	of	Date of	Last Day	Last Leave	Less this	Balance	
[	Days App	lied	Commencement	of Leave	Balance	Application	of Leave	
	1		01/09/2023	28/08/2023	2	1	1	
During tl	he leave	, appli	cant can be contac	ted at:				
Address:	•	No 36	5, Jalan 9/9J Seksy	ven 9 Bandar Baru	Tel No	,	017 7649362	
Addi 633		Bang	i			Emergency Contact No. : 019-2866		
	-							
Applicat	ion confi	rmod :	and recommended	by	* Applic	App ation Approved/De	licant's signature	
Аррисас	ion com	iiiicu	and recommended	Бу	Аррисс	acion Approved/ De	ctined	
						ional Manager/Bra of Department	nch Manager/	
					G	rizmen		
Name /	PF No :				Name	/ PF No : Rizwan	Mohammed Sheikh	
Designat					Design		igital Engineering	
Tel. No	/ Ext :					o / Ext : 011 268		
Date	:				Date	: 29/08/2	023	
If declin	ed, plea:	se stat	e reason:					
Note	*		Delete whichever	is <b>NOT</b> applicable			<del></del>	
Note	#	#	Relevant documents must be submitted to support application where applicable.					



## APPLICATION LEAVE FOR INTERNSHIP

Branch/Department			t : Delivery & Ops Digital Banking, Group Technology			Date :	21/09/2023	
Name : Muhammad Alif			: Muhammad Alif	Bin Masrul Nizam		PF No. /Ref No.:	00152153	
Internship Period : Start Date: 10/07				7/2023 End Date: 29/09/2023				
Natur	e of Leave	: <b>V</b>	Please tick whiche	ver applicable.				
		/	Annual NOTE:	-	to for the Bank	may want to indicato extend possible	ate the location/city assistance in the	
				Country:	Citv:			
			Compassionate					
			Marriage					
	Numbe Days Ap		Date of Commencement	Last Day of Leave	Last Leave Balance	Less this Application	Balance of Leave	
	1		25/09/2023	01/09/2023	1	1	0	
Addre	ess:	Bang	i	en a Dandar Dard	Tel No Emerg	ency Contact No. :	017 7649362 019-2866961	
Appli	cation con	firmed	and recommended b	у	* Applic	App ation Approved/De	icant's signature	
						ional Manager/Bra of Department	nch Manager/	
						Rizwo	<u>,</u>	
Desig	e / PF No nation No / Ext	: : : : : : : : : : : : : : : : : : : :			Desigr	/ PF No : Rizwan nation : Head Di o / Ext : 011 268 : 24/08/20	gital Engineering 1 0786	
If dec	clined, plea	ase stat	e reason:					
 Note Note		*	Delete whichever i		ed to support app	olication where app	olicable.	