



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 01/09/2023 to 30/09/2023
 Maybank Account No :

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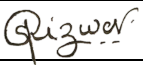
2. TRAINING DAYS

Total no. of days as per period of claim 30
 (-)
 * Medical Leave - Date(s) : _____ No. of day(s) : _____
 * Leave Taken - Date(s) : 01/09/2023, 25/09/2023 No. 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 No. of day(s) : 1
 Total no. of actual working days = 18 + 2 (Day Paid Leave) = 20

Total pay as per working days @ RM50 per day = RM 1000

***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 : 26/09/2023

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

GROUP RESOURCING, GROUP HUMAN CAPITAL
 44TH 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 (3rd, 10th, 16th, 25th of respective month).**
 The payment date are 7th, 14th, 22th, and end of respective month. **It's compulsory to provide Cost Centre & GL.**



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 : Start Date: 10/07/2023 End Date: 29/09/2023

Nature of Leave: ☒ **Please tick whichever applicable.**

☐ Annual **NOTE:** If you are travelling overseas, you may want to indicate the location/city you are travelling to for the Bank to extend possible assistance in the event of any crisis or disaster.

Country: _____ City: _____

☐ Compassionate


☐ Marriage

Number of Days Applied	Date of Commencement	Last Day of Leave	Last Leave Balance	Less this Application	Balance of Leave
1	01/09/2023	28/08/2023	2	1	1

During the leave, applicant can be contacted at:

Address: No 36, Jalan 9/9J Seksyen 9 Bandar Baru
Bangi

Tel No. : 017 7649362
Emergency Contact No. : 019-2866961


Applicant's signature

Application confirmed and recommended by

* Application Approved/Declined

* By Regional Manager/Branch Manager/
Head of Department



Name / PF No :
Designation :
Tel. No / Ext :
Date :

Name / PF No : Rizwan Mohammed Sheikh
Designation : Head Digital Engineering
Tel. No / Ext : 011 2681 0786
Date : 29/08/2023

If declined, please state reason: _____

Note * Delete whichever is **NOT** applicable
Note # Relevant documents must be submitted to support application where applicable.



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