

Please attach a passport size photo here

STUDENT EXCHANGE PROGRAMME APPLICATION FORM (INBOUND)

Instructions:

- 1. This application is for students who are applying to the Universiti Utara Malaysia as part of a specific exchange agreement between the Universiti Utara Malaysia and a partner institution. Application will not be assessed without the signed endorsement of the partner institutions International Office.
- 2. Please fill in block letter and tick (\checkmark) whichever appropriate.

PART I: TO BE COMPLETED BY THE APPLICANT

Section A: Personal Details

Full Name (as appea	ar on the passport):				
Date of Birth (<i>dd/mmm/yyyy</i>): Nationality:		Sex:	Male	Female	
		Passport No.: Place of Issue:			
Passport Expiry Dat					
Address:					
Post code:	State:		_ Country: _		
Phone No.: Mobile No.:		E-mail Address:			
Section B: Academ	ic Details				
Name of University					
Name of Current De		Major Field o	of Study:		
Degree start date (a		Curre	nt Semester:		
Expected Degree Co	<i>yyy</i>):	Curre	nt CGPA:		
English Proficiency one of the following		ent English	proficiency an	nd attach certified copy from	
First Langua	ge is English				
International English Language Testing System (IELTS) Score:					
Test of Engli	sh as a Foreign Language (TOEFL)			
Paper		Score:			
Inter	net Based Test		Score:		
Other Englis	h Proficiency test accepted	by partner	University		

Section C: Details of Exchange Programme 1. Commencement Semester: Year: Length of period: One (1) Semester Two (2) Semesters Starting Semester: 1st Semester (September) 2nd Semester (February) 2. Course Registration Semester 1 (September – January) Year: Course Code Course Name Unit/Credit

course maine	Hours

Semester 2 (February – August)

Year:_____

Course Code	Course Name	Unit/Credit Hours

Section D: Declaration

I declare that the above information is correct, and I understand that admission to Universiti Utara Malaysia as an exchange student does not entitle me to be awarded a qualification from the Universiti Utara Malaysia.

I agree that all information given is true and I will return back to my home university after completing my exchange program at Host University. I also understand that I am subjected to all rules and regulations at host University whilst studying at Host University.

Signature:	Date:
Documents enclosed:	A copy of your English proficiency test (if applicable)
	Certified copy of your academic transcript (in English)
	Passport size photograph
	A copy of the information page of your passport

PART II: TO BE COMPLETED BY APPLICANT INTERNATIONAL OFFICE

Note: This application is to be approved and submitted by your International Office to the address below:

This is to certify that the above applicant is a registered student of this university.

Name of International Office Officer:

Position: _____

Signature:_____ Office

Official Stamp:

Date: _____

Please address your application to:

Centre for International Affairs and Cooperation (CIAC), Universiti Utara Malaysia, 06010 UUM Sintok, Kedah, Malaysia. Tel: +604-928 3401/+604-928 3411 Fax: +604-928 3405 Email: ciac@uum.edu.my www.ciac.uum.edu.my