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|  | PERKHIDMATAN UTAMASISWAZAHPEJABAT TIMBALAN NAIB CANSELOR(AKADEMIK & ANTARABANGSA) |
| APPLICATION FOR CHANGE OF PROGRAMME/STRUCTURE/FIELD OF STUDY/ ADVISOR FOR NEW STUDENT |

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| **TO BE COMPLETED BY THE APPLICANT** | | | | | | | | | | | | | | | |
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| Please tick (√) in the box provided: | | | | | | | | | | | | | | | |
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| 1. Full Name | | | | : | |  | | | | | | | | | |
| 1. I.C No. /   Passport No. | | | | : | |  | 1. E-mail Address | | | | : | |  | | |
| 1. Programme offered | | | | : | | Choose an item. | 1. Semester offered | | | | : | | Choose an item. | | |
| 1. Faculty/Institute | | | | : | | Choose an item. | 1. Offer Status | | | | : | | Choose an item. | | |
| 1. Details of Transfer | | | | : | |  |  | | | |  | |  | | |
|  | Details | | | Current | | | | | | New | | | | |  |
|  | Faculty/Institute | | | Choose an item. | | | | | | Choose an item. | | | | |  |
|  | Programme | | |  | | | | | |  | | | | |  |
|  | Structure | | | Please click here to choose an item | | | | | | Please click here to choose an item | | | | |  |
|  | Field of Study | | |  | | | | | |  | | | | |  |
|  | Advisor | | |  | | | | | |  | | | | |  |
|  | Semester | | |  | | | | | |  | | | | |  |
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| 1. Please state reasons for application: | | | | | | | | | | | | | | | |
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| 1. Date apply | | | | | : | Click here to enter a date. | | | | | | | | | |
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| 1. Advisor Comment | | | | | : |  | | | | | | | | | |
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|  | **Comment of current Advisor / Supervisor:** | | | | | | **Comment of new Advisor/ Supervisor** | | | | | | | |  |
| ason |  | | | | | |  | | | | | | | |  |
|  |  | | | | | |  | | | | | | | |  |
|  | Name : | | | | | | Name : | | | | | | | |  |
|  | Department : | | | | | | Department : | | | | | | | |  |
|  | Tel. No. : | | | | | | Tel. No. : | | | | | | | |  |
|  | Date : | | | | | | Date : | | | | | | | |  |
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| **FACULTY / INSTITUTE‘S SUPPORT(NEW)** | | | | | | | | | | | | | | | |
| Status | | : |  | Supported | | | |  | Not Supported | | | | | | |
| Remark | | : |  | | | | | | | | | | | | |
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| Signature | | : |  | | | | | |  | | |  | |  | |
| Name | | : |  | | | | | |  | | |  | |  | |
| Official Stamp | | : |  | | | | | | Date | | | : | |  | |
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Note: The completed form should be submitted to Admission Unit for the new offer letter.