

MAIN SERVICE POSTGRADUATE OFFICE OF THE DEPUTY VICE CHANCELLOR (ACADEMIC & INTERNATIONAL)

DECLARATION FORM FOR ONLINE REGISTRATION [NEW LOCAL POSTGRADUATE STUDENTS]

| | | Name | : |
|---|--|-----------------------|---|
| | | IC No. | : |
| | | Nationality | : |
| | | Programme Category | □ Normal Degree □ International Collaborative Programme (ICP) □ Industrial Programme □ English Programme |
| | | Programme | : |
| (affix a passport-sized photo (white/blue background)) | | Field of Study | : |
| | | Faculty | : |
| | | Semester Enrolled | : |
| | | Email Address: | : |
| | | Corresponding Address | : |
| | | | |
| 1. | I solemnly declare that— (a) all the information and the supporting documents given by me in this application are true and correct to the best of my knowledge; (b) I shall abide and comply with the rules and regulations as notified by the University from time to time; | | |
| 2. | I understand that— | | |
| | (a) the University reserves the right to request additional supporting documentation; and | | |
| (b) if any of the above statements and my admission shall be automaticall | | | ments are found to be incorrect or false, I am liable to be disqualified and cancelled by the University. |
| 3. | I hereby certify that I have read and understood the contents of this declaration. I hereby permit the University to use, display or transfer any of the details furnished by me in this form for complying with the admission formalities. | | |
| Signature : | | | |
| Name | : | | |
| Date | : | | |