

Date of Birth: dd / mmm / yyyy		
de		

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I declare that t exchange stud		mation is correct, and I	understand tha	t admission to Universiti U	tara Malaysia as an
g .		iven is true and I will r	eturn back to m	y home university after cor	npleting my exchange
program at Ho	ost University. dying at Host U	I also understand that	I am subject to a	Ill the rules and regulations	at host University
Signature:				Date: _	
Name of Internationa	al				
Office officer:				Position:	
Signature:	<u></u>			Date:	

This application must be completed and sent to:

Universiti Utara Malaysia Offshore Office (China)
Add: 413,Qinglan Plaza, No.24 Dongsishitiao Dongcheng Dist., Beijing, P.R.China
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