UUM/CIAC/IM/2024

|  | | **MOBILITY UNIT**  **CENTRE FOR INTERNATIONAL AFFAIRS AND COOPERATION**  **UNIVERSITI UTARA MALAYSIA**  **Phone: 04-9283411**  **Fax: 04-9283405**  **Email: global.mobility@uum.edu.my /**  **norshahida@uum.edu.my** | | | **Please Affix**  **Your Current Passport-Size Photo Here** | |
| --- | --- | --- | --- | --- | --- | --- |
| **STUDENT EXCHANGE PROGRAM (INBOUND)**  **APPLICATION FORM** | | | | | | |
| **APPLICATION REQUIREMENTS** | | | | | | |
| 1. Student exchange applications are open to students from Partner Universities and Non-Partner Universities. 2. Application will not be assessed without the endorsement of the International Officer or Student Exchange Coordinator of Partner Universities or Non-Partner Universities. 3. All supporting documents must be submitted together with this application form. Only completed application forms will be accepted and assessed. Incomplete application forms will be returned back to the applicants or senders. 4. Please send your application by e-mail to Mobility Unit, Centre for International Affairs and Cooperation, Universiti Utara Malaysia to global.mobility@uum.edu.my and norshahida@uum.edu.my. | | | | | | |
| **PART 1: TO BE COMPLETED BY THE APPLICANT** | | | | | | |
| **SECTION 1: PERSONAL DETAILS OF THE APPLICANT** | | | | | | |
| Full Name  (Name as in MRZ in the Passport) |  | | | | | |
| Current Passport No. |  | | National Identity Card No. |  | | |
| Date of Birth |  | | Gender | ☐ Male | | ☐ Female |
| Country of Birth |  | | Citizenship |  | | |
| Religion |  | | Maritial Status |  | | |
| Passport Expiry Date |  | | Passport’s Place of Issue |  | | |
| Mailing Address |  | | | | | |
| Postcode |  | | City / State |  | | |
| Country |  | | Personal Mobile No. |  | | |
| Email Address |  | | | | | |
| **Emergency Contact Details:** | | | | | | |
| Full Name |  | | | | | |
| Relationship |  | | Personal Mobile No. |  | | |
| Email Address |  | | | | | |

| **SECTION 2: ACADEMIC DETAILS** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Home University |  | | | | | | |
| Home University Address |  | | | | | | |
| Postcode |  | | | City / State | |  | |
| Country |  | | | Office Number | |  | |
| Name of Current Study Program at Home University |  | | | | | | |
| Major Field of Study |  | | | | | | |
| Current Semester |  | | | Current CGPA | |  | |
| **Academic Transcript:**  Please provide an up-to-date certified Academic Transcript showing all the subjects attempted, grades achieved (including failures) and an explanation of the grading system. Applicants who submit transcripts in a language other than English must provide an officially certified translation. | | | | | | | |
| **SECTION 3: ENGLISH PROFICIENCY** | | | | | | | |
| Is English your first/main language? | | | | | | ☐ Yes | ☐ No |
| Is English your current medium of academic instructions at your university? | | | | | | ☐ Yes | ☐ No |
| **Please indicate any English language proficiency test you have taken and the result:**  Please provide a certified copy of MUET/IELTS/TOEFL/other test results to demonstrate your English proficiency. | | | | | | | |
| ☐ Malaysian University English Test (MUET) | | ☐ International English Language Testing System (IELTS) | | | ☐ Test of English as a Foreign Language (TOEFL) Internet Based Test | | |
| ☐ Cambridge English Advanced Test | | ☐ Pearson Test of English Academic | | | ☐ Others: | | |
| Score: | |  | | | | | |
| **SECTION 4: PROPOSED STUDY EXCHANGE PLAN** | | | | | | | |
| 1. **Undergraduate Program:** | | | | | | | |
| Study duration in UUM | | ☐ One Semester (6 Months) | | | ☐ Two Semester (12 Months) | | |
| Commencement Date | | ☐ Semester I/Fall (Oct - Feb) | | | ☐ Semester II/Spring (Mar - Jul) | | |
| Will you be able to start your studies at the beginning of the Semester? | | ☐ Yes | ☐ No | | If you answered **No** to this question, please state the earliest date you will be able to start your studies in UUM: | | |

| **SECTION 4: PROPOSED STUDY EXCHANGE PLAN (CONT.)** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Postgraduate Program:** | | | | | | | | |
| UUM Campus Choice: | | ☐ UUM Sintok Campus, Kedah | | | | ☐ UUM Kuala Lumpur Campus | | |
| Study duration in UUM | | ☐ One Semester  (4 Months) | | | ☐ Two Semester  (8 Months) | | | ☐ Three Semester  (12 Months) |
| Commencement Date | | ☐ Semester I  (Sep - Dec) | | | ☐ Semester II  (Jan - Apr) | | | ☐ Semester III  (May - Aug) |
| Will you be able to start your studies at the beginning of the Semester? | | ☐ Yes | | | ☐ No | | | If you answered **No** to this question, please state the earliest date you will be able to start your studies in UUM: |
| **Proposed Study Program Name at UUM:**  Please refer [here](https://docs.google.com/spreadsheets/d/1xQr9lTeKxessRl9Wzzo9FopUg_MbJIZG/edit?usp=sharing&ouid=108059340709526466889&rtpof=true&sd=true). | | |  | | | | | |
| **Proposed School/Faculty Name at UUM:**  Please refer [here](https://docs.google.com/spreadsheets/d/1xQr9lTeKxessRl9Wzzo9FopUg_MbJIZG/edit?usp=sharing&ouid=108059340709526466889&rtpof=true&sd=true). | | |  | | | | | |
| **Proposed Course to be Taken at UUM:**  Please refer [here](https://docs.google.com/spreadsheets/d/1jDclaqLiAiD0jJ7c_DhT07E5hlvfQu5l3PFDoJBl-ps/edit#gid=0). Please list at least 4 courses to be taken at UUM at a maximum of 18 credit hours only. | | | | | | | | |
| **Course Code** | **Course Name** | | | | | | | **Unit/Credit Hours** |
|  |  | | | | | | |  |
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| **SECTION 5: ACCOMMODATION** | | | | | | | | |
| **Please select your preferred accommodation at UUM Sintok Campus:**  Please note that the applicant at UUM Kuala Lumpur Campus will need to find own accommodation. | | | | | | | | |
| ☐ INASIS Residential Hall  (In-Campus)  (MYR720/semester/student) | | ☐ University Inn (In-Campus)  (MYR1,200/month/unit) | | | | | ☐ EDC-UUM Hotel (Off-Campus)  (MYR2,500/month/unit) | |
| **SECTION 6: QUESTIONNAIRES** | | | | | | | | |
| ☐ Academic reputation  ☐ Academic disciplines offered  ☐ Recommendation from UUM agent or representative | | | | ☐ Recommendation by International Officer, Student Exchange Coordinator or staff at your Home University  ☐ Recommendation by other students / friends  ☐ Location of UUM  ☐ Other (please specify): | | | | |

| **SECTION 7: CHECKLIST** | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| I hereby submit this application for the Study Abroad program and have attached all the following compulsory documents in support of the information provided: | | | | | | |
| ☐ An up-to-date certified academic transcript (in English)  ☐ A Nomination Letter from the Home University (to prove that the applicant is currently enrolled as a full-time student at Home University and also indicating that the applicant will be participating in the Student Exchange Program at UUM for the upcoming Fall/Spring Semester)  ☐ A clear copy of current passport data pages or national identity card  ☐ A certified copy of MUET/IELTS/TOEFL/other English proficiency test result (if English is not first/main language)  ☐ Disability support details (if applicable)  ☐ A copy of current passport-size photo (please adhere to the EMGS passport photo guidelines which can be viewed via <https://visa.educationmalaysia.gov.my/guidelines/passport-photo-guidelines.html/>) | | | | | | |
| **SECTION 8: DECLARATION BY APPLICANT** | | | | | | |
| I declare that the information provided is in this application form is true and complete. I acknowledge that Universiti Utara Malaysia reserves the right to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information. I am aware of the conditions relating to my application and admission and agree to pay all fees for which I am liable to Universiti Utara Malaysia. I understand that admission to Universiti Utara Malaysia as an exchange student does not entitle me to be awarded a qualification from Universiti Utara Malaysia and I will return back to my Home University after completing my student exchange program. I also understand that I am subjected to all rules and regulations at Universiti Utara Malaysia (Host University) while studying at Universiti Utara Malaysia. | | | | | | |
| Applicant’s Signature: …………………………………………….. | | | Date: ……………………………………. | | | |
| **PART 2: TO BE COMPLETED BY THE INTERNATIONAL OFFICER OR STUDENT EXCHANGE COORDINATOR OF HOME UNIVERSITY** | | | | | | |
| **SECTION 1: PERSONAL DETAILS OF THE INTERNATIONAL OFFICER OR STUDENT EXCHANGE COORDINATOR** | | | | | | |
| Title | Prof./Associate Prof./Assistant Prof./Dr./Mr./Mrs./Ms. | | | | | |
| Full Name |  | | | | | |
| Designation/Position |  | Office/  Department Name | |  | | |
| Mailing Address |  | | | | | |
| Postcode |  | City / State | |  | | |
| Country |  | Personal Mobile No. | |  | | |
| Email Address |  | | | | | |
| Does this Home University have active MoU/MoA with UUM? | | | | | ☐ Yes | ☐ No |
| Does this applicant receive financial support from Home University? If you answered **Yes** to this question, please submit a sponsorship/guarantee letter. | | | | | ☐ Yes | ☐ No |

| **SECTION 2: DECLARATION BY INTERNATIONAL OFFICER OR STUDENT EXCHANGE COORDINATOR** | | | | |
| --- | --- | --- | --- | --- |
| I declare that the information provided is in this application form is true, complete and the applicant is a registered and active student of this Home University. | | | | |
| Full Name | |  | | |
| Designation/Position | |  | | |
| Signature: …………………………………………….. | | | | Date: ……………………………………. |
| Official Stamp: | | | | |
| **FOR CIAC OFFICE USE ONLY** | | | | |
| Checked by: | | | Verified by: | |
| (Signature, Stamp & Date) | | | (Signature, Stamp & Date) | |
| UUM Offer Letter’s Ref. No. | | |  | |
| UUM Offer Letter’s Date | | |  | |
| Applicant’s UUM Matric No. | | |  | |
| Student Exchange Program’s Period | | | 1 Semester/2 Semester/3 Semester | |
| Registration Date | | |  | |
| Intake | | |  | |