



Instructions to candidate:

Ensure that the information needed in the form is complete before submission to the College / Faculty / Campus Office.

SECTION I (To be filled by student in CAPITAL LETTERS)

Name:																												
I.C No / Passport No.:											Faculty Code																	
Student ID No.:											Campus																	
Programme Code:						Semester			Gender	<i>Male</i>	<input type="checkbox"/>	<i>Female</i>	<input type="checkbox"/>															
Level of Study:	<i>Master</i>	<input type="checkbox"/>	<i>PhD</i>	<input type="checkbox"/>	Mode of Study	<i>Full Time</i>	<input type="checkbox"/>	<i>Part Time</i>	<input type="checkbox"/>	<i>FLP</i>	<input type="checkbox"/>																	

SECTION II (To be filled up in CAPITAL LETTERS)

Please provide particulars to be updated only:

Mailing Address ()
* Please tick (✓) for change of address

																										Postcode				
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	-----------------	--	--	--	--

Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

I.C No. / Passport No.:

--	--	--	--	--	--	--	--	--	--

Tel.No.:

--	--	--	--	--	--	--	--	--	--

Mobile Phone No.:

--	--	--	--	--	--	--	--	--	--

E-mail:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Effective date:

		-			-	2	0		
--	--	---	--	--	---	---	---	--	--

.....
Student's Signature

College / Faculty / Campus record updated by

.....
Signature

.....
Date