

CENTRE FOR GRADUATE STUDIES UNIVERSITI TUN HUSSEIN ONN MALAYSIA STUDENT INFORMATION AMENDMENT FORM

(This form should be completed in capital letters)

NRIC / PASSPORT NUMBER	:												
MATRICULATION NUMBER	:												
FULL NAME	:												
FACULTY	:												
ACADEMIC PROGRAMME	:												
PERMANENT/CURRENT ADDRESS	:												
TOWN	:												
POSTCODE	:												
STATE	:												
PHONE NUMBER (HOME)	:												
MOBILE PHONE	:												
E-MAIL ADDRESS	:												
STUDENT'S DECLARATION													
I hereby declare that the information best of my knowledge.	natio	n pro	ovide	ed in 1	this a	ppli	catio	n is t	rue a	ınd a	ccura	ate to	the
(Student's Signature)			=							(Dat			
Kindly provide supporting documentation for a straightful action and electrication card or an el				he assoc	ciated i	nforma	tion. F	or insta	ince, fo	r chan	ges in a	ddress,	please
OFFICE USE ONLY													
Updated to SMAP:		Yes						Date	•	:			
		No						Initi	als	:			