

APPLICATION FORM FOR UNDERGRADUATE STUDIES PROGRAMME

SEMESTER	Semester I	(September Intake)	Semester II	(February Intake)
Intake Year				
Progressive English Prog	gram(PEP) May	/ Intake	August Intake	
		PROGRAMME D	ETAILS	
Choice	Code	Programme		Faculty
First Choice				
Second Choice				
Third Choice				
**UMS RESERVES THE RIC ACADEMIC BACKGROUND.		A DIFFERENT PROGRAMIV	TE THAT SUITED ACCORDIN	NG TO THE CANDIDATE'S
		PERSONAL DE	TAILS	
Name as stated in the				
Passport				
Date of Birth				
Passport No				
Gendar				
Ethnic				
Nationality				
Email Address				
Phone No.				
House Phone No.				
Fax No.				
Postal Address				
Emergency Contacts				
Name				
Phone No.				
Email Address				
Family Background				
Name				
Relationship				
Occupation				
Passport/ID No				
Email Address				
Mobile Phone No.				
House Phone No.				
Office Phone No.				
Postal Address				
Name				
Relationship				
Occupation				
Passport/ID No				
Email Address				
Mobile Phone No.				
House Phone No.				
Office Phone No.				
Dantal Address	1			

Name	
Relationship	
Occupation	
Passport/ID No	
Email Address	
Mobile Phone No.	
House Phone No.	
Office Phone No.	
Postal Address	
Name	
Relationship	
Occupation	
Passport/ID No	
Email Address	
Mobile Phone No.	
House Phone No.	
Office Phone No.	
Postal Address	
Name	
Relationship	
Occupation	
Passport/ID No	
Email Address	
Mobile Phone No.	
House Phone No. Office Phone No.	
Postal Address	
Postal Address	
Language Proficiency In	oformation .
	nomation
Test Type Result	
Month Taken	
Year Taken	
Will be taken	
Will be taken	
Academic Qualification	
Level	
Degree Name	
High School/	
College/University	
Name	
Graduation Year	
Result Type	
rtesuit Type	
Financial Support Inform	nation (More than 2 names need to be provided)
Support Type	matter (more than 2 manifes need to be provided)
опрон турс	
Guarantor's Name	
Relationship	
Occupation	
Monthly Income	
(RM)	
Passport/ID No	
Email Address	
Mobile Phone No.	
House Phone No.	
Office Phone No.	
Postal Address	
. Jotal / taaloos	

Relationship Occupation Monthly Income (RM) Passport/ID No Email Address Mobile Phone No. House Phone No. Office Phone No. Postal Address	Guarantor's Name	
Monthly Income (RM) Passport/ID No Email Address Mobile Phone No. House Phone No. Office Phone No.	Relationship	
(RM) Passport/ID No Email Address Mobile Phone No. House Phone No. Office Phone No.	Occupation	
Passport/ID No Email Address Mobile Phone No. House Phone No. Office Phone No.	Monthly Income	
Email Address Mobile Phone No. House Phone No. Office Phone No.	(RM)	
Mobile Phone No. House Phone No. Office Phone No.	Passport/ID No	
House Phone No. Office Phone No.	Email Address	
Office Phone No.	Mobile Phone No.	
	House Phone No.	
Postal Address	Office Phone No.	
	Postal Address	

DOCUMENTS

- 1. Certified copy of academic transcripts
- 2. Certified copy of certificate of graduation(degree)
- 3. Coloured passport size photograph
- 4. Copy of international passport(all pages with a valid expiry date)

DECLARATION

I understand that withholding information requested may make me ineligible for admission to the University Malaysia Sabah and I also would like to certify that the information that I have provided on this application and in all other application materials is complete, accurate and true to the best of my knowledge and if admitted, I agree to abide by the rules and regulations of the University. I understand that misrepresentation of application information is a sufficient ground for cancelling admission or registration.

Applicant's Signature: Date: