



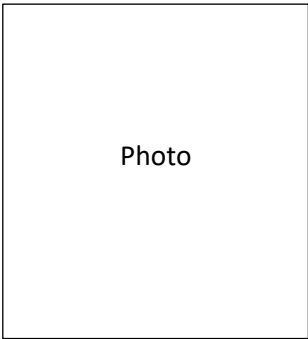
International Office

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APPLICATION FORM
360° GLOBAL EXCHANGE & MOBILITY (GEM)
FOR INBOUND STUDENTS



SUBMISSION REQUIREMENT CHECKLIST

- 1. Please **TYPE**, complete all sections, and print neatly in **CAPITAL LETTERS**.
- 2. Submit the following documents in softcopy.

CHECKLIST: Tick the appropriate box.

- A certified copy of the detail page of your passport. The passport must be valid for at least six (6) months, prior to the date of arrival in UNITEN.
- A certified copy of the most recent academic transcript. (A certified translation of the transcript is needed if the original language is not English).
- Mobility Confirmation Letter from your institution.
- Curriculum Vitae and ONE reference letter.

PERSONAL DETAILS

Name (as shown on Passport) :	
Gender : <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth : Month_____/Day_____/Year_____
Passport Number:	Nationality:
Country of Birth :	Email:
Phone Number:	Mobile Number:
Mailing Address :	Home Address :

MEDICAL DISCLOSURE	
Do you have a disability, impairment or long-term medical condition which may affect your studies?	
<input type="checkbox"/> Yes, please provide details: _____ <input type="checkbox"/> No	
EMERGENCY CONTACT DETAILS	
Name:	Relationship:
Address:	
Mobile Number:	Email:
ACADEMIC BACKGROUND	
Name of university :	Country :
University Phone Number :	University Fax Number :
Current CGPA :	
Level of Study :	<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Master <input type="checkbox"/> Ph.D.
Programme:	Specialization (If applicable):
Year of study :	<input type="checkbox"/> 1 st year <input type="checkbox"/> 2 nd Year <input type="checkbox"/> 3 rd Year <input type="checkbox"/> 4 th Year <input type="checkbox"/> 5 th Year
Current semester :	Expected year of graduation :
1. Academic Referee Name: _____ Position Title: _____ College: _____ Phone No.: _____ Email: _____	
2. Co-ordinator, Student Mobility Program Name: _____ Position Title: _____ College/Department: _____ Phone No: _____ Email: _____	

ENGLISH PROFICIENCY

English language details. Please tick (✓).

1. English is my first language/mother tongue
 2. English is the language of instruction at my home institution (provide evidence)

If 1 and 2 do not apply:

3. My TOEFL score is 500 **OR** my IELTS band is 5.0 (undergraduate) or 6.0 (post-graduate).
 4. Other English proficiency results or recommendation from home institution.

FINANCIAL PLAN

- Study Abroad student category will have to pay uniten tuition fee.
- Student Exchange category (with MOU) tuition fee is waived.

Type of Mobility	Classes	Industrial Training	Research Internship	Research Attachment (Min. 2 weeks)	Short course/ IEP/ Summer –Winter Programme	Oversea Transfer Programme	
Please tick (✓) the type of Mobility							
1	Tuition Fee	Study abroad: Uniten fee Student exchange: waived				Course Fee	UNITEN Fee
2	360 GEM Fee	300	300	300	Min. 100		
3	Student Card	70	70	70	70		
4	Library Fee (Per Semester)	260	-	-	-		
5	Student Activity Fee (Per Semester)	260	-	-	-		
6	Mobility student visa charges	2 to 6 months: 1300 (Estimated) 3 to 12 months: 1500 (Estimated)					
7	Caution Deposit (refundable)	300	300	300	300		
8	Services	260	-	200	Min. 100		
9	Accommodation On-Campus : (1 month)	For accommodation rate, kindly refer to the accommodation leaflet. Rates are subject to change.					
Total estimated expenses		MYR	MYR	MYR	MYR		

- Transactions in Malaysian Ringgit (MYR)

How would you intend to finance your study at UNITEN? Please Tick (✓)

- Self – Funding
 Sponsoring Body/Institution/Association: _____

*Please attach sponsorship letter/ document.

- For scholars, you are required to **pay the total fee** before/during registration.

Name (as shown on Passport)	Email:			
STUDY PLAN				
<input type="checkbox"/> Credit Transfer: _____				
TYPE 1: Classes				
	Subject Code	Please list your request for UNITEN subjects:	Credit Hour	UNITEN COURSE COORDINATOR APPROVAL
1				
2				
3				
4				
5				
Please state other options:				
1				
2				
3				
TYPE 2: Research Attachment/ Research Internship/Industrial Training				
Research Title: _____				
1. Research Centre : _____				
2. Supervisor's Name: _____				
3. Position Title: _____ Grade: _____				
4. Phone No.: _____ Email: _____				
This application is approved for :				
Programme: _____				
Signature & official stamp : _____				
STUDENT MOBILITY DETAILS				
Type of mobility programme:				
<input type="checkbox"/> One Semester Student Exchange		<input type="checkbox"/> Research Attachment		
<input type="checkbox"/> One Semester Study Abroad		<input type="checkbox"/> Short Course/Summer Programme		
<input type="checkbox"/> Industrial Training		<input type="checkbox"/> Oversea Transfer Programme		
<input type="checkbox"/> Research Internship				
Period of Mobility at UNITEN : Commencing from _____ to _____				
APPROVAL				
This application is approved/ not approved for UNITEN 360 GEM programme.				

Azlina Binti Mohamat Nor				
Head of Unit, Global Exchange and Mobility				

CONSENT & DECLARATION

Personal Data Consent Clause

I consent to Universiti Tenaga Nasional (“UNITEN”) to collect, process, record, store and/or disclose personal data and sensitive personal data for all purposes associated in relation to my agreement, education, administration, attendance record and any other lawful activities performed or related to services rendered by UNITEN.

Declaration & Acknowledgement

I acknowledge and confirm that all information and documents provided by me is true and correct. I hereby consent to UNITEN to collect, process, record, store and/or disclose my personal data in accordance to the mentioned above purposes. Universiti Tenaga Nasional may terminate my application or nomination for the Student Mobility Program if I have misrepresented my past and/or present circumstances. I hereby agree that, Universiti Tenaga Nasional will not be liable in any way for any loss, injury, sickness or damage I may suffer whilst participating in the program, or which results in any way from my participation in the program, other than arising from or as a consequence of any negligent act or omission of Universiti Tenaga Nasional or its officers, employees or agents.

Signature of Applicant/ Student :

Name :

Date :

Parent/Legal Guardian Consent (for Applicant/Student below 18 years old)

I as the Parent/ Legal Guardian are giving my personal information and also Applicant/Student’s personal information to Universiti Tenaga Nasional (“UNITEN”) and I agree for UNITEN to collect, process, record, store and/or disclose my personal data and the Applicant/Student’s personal data for all purposes associated with my agreement, education, administration, attendance record and any other lawful activities performed related to services rendered by UNITEN.

Declaration & Acknowledgement

I acknowledge and confirm that all information and documents provided by me is true and correct. I hereby consent to UNITEN to collect, process, record, store and/or disclose my personal data in accordance to the mentioned above purposes. I acknowledge that the Universiti Tenaga Nasional may terminate this application or nomination for the Student Mobility Program if any misrepresented past and/or present circumstances. I hereby agree that, Universiti Tenaga Nasional will not be liable in any way for any loss, injury, sickness or damage may suffer whilst participating in the program, or which results in any way from participation in the program, other than arising from or as a consequence of any negligent act or omission of Universiti Tenaga Nasional or its officers, employees or agents.

Signature of Parent/Legal Guardian :

Name :

Date :

For UNITEN Office Use Only

COLLEGE REVIEW for 360° GLOBAL EXCHANGE & MOBILITY (360GEM)

INBOUND STUDENT

Recommendation and Approval by College

The Mobility College Review Committee has reviewed the application and approved the applicant as inbound student at Universiti Tenaga Nasional.

Reviewed by :

Head of Department / Director of Research Centre

Date:

Recommended by :

Deputy Dean (Student Affair and External Relations)

Date:

Approved by :

Dean

Date: