

# Universiti Tunku Abdul Rahman (UTAR) Student Exchange Programme (SEP) Application Form for Academic Exchange and Internship (For Inbound Students)

Insert your photo WHITE background (4.5 cm x 3.5 cm) here

## **CHECKLIST**

## The following documents MUST be included to complete the application process:

- A completed Student Exchange Programme (SEP) Inbound Application Form, FM-CEE-SEP-001 and a passport size photo.
- A letter of recommendation from Head of Department / Dean from Home Institution who supports their application.
- □ A copy of official academic transcripts (in certified English translation).
- A copy of passport (only pages with passport number, photo, issuance and expiry date).

# The following additional documents are required for Student pass and Visa Application:

- □ A copy of passport size photo with size 4.5 cm x 3.5 cm (white background) JPEG format.
- A letter of confirmation from Home Institution to prove that applicant is enrolled as a full-time student at Home Institution.
- A copy of passport for all pages including blank pages (The passport must be valid for at least 12 months from the expected date of entry).
- Health Declaration Form.

Please email your completed application form to mobility.cee@utar.edu.my

If you have any enquiries, please do not hesitate to contact us.

## <u>In person</u>

### **Sungai Long Campus**

Centre for Extension Education (CEE)
Universiti Tunku Abdul Rahman
KB008B, Ground Floor, KB Block,
Jalan Sungai Long,
Bandar Sungai Long,
Cheras, 43000, Kajang,
Selangor Darul Ehsan,
Malaysia.

**Tel No.:** +(603) 9086 0288 Ext. 364

**Fax No.:** +(603) 9019 8868

**Mobile Phone No.:** +6012-6267373

Email: mobility.cee@utar.edu.my

Website: https://cee.utar.edu.my/

### Kampar Campus

Centre for Extension Education (CEE) Universiti Tunku Abdul Rahman Heritage Building, First Floor A178A, Jalan Universiti, Bandar Barat, 31900 Kampar, Perak Darul Ridzuan, Malaysia.

**Tel No.:** +(605) 468 8888 Ext. 2236

**Fax No.:** +(605) 466 7796



Form Title: Student Exchange Programme (SEP) Inbound Application Form				
Form Number: FM-CEE-SEP-001	Rev No.: 2	Effective Date: 23 December 2020	Page No.: Page 2 of 4	

Please fill in the form below and  $(\checkmark)$  tick the checkbox as appropriate.

1. PROPOSED FA	ACULTY				
For Kampar Cam	pus:				
□ Faculty of A	irts and Social Science	<b>)</b>			
□ Faculty of B	Susiness and Finance				
	ingineering and Green	Technology			
	nformation and Commu		chnology		
□ Faculty of S			0,		
	Chinese Studies				
□ Other (pleas	se specify):				
· ·	, ,,				
For Sungai Long	Campus:				
□ Faculty of A	accountancy and Mana	gement			
	Creative Industries				
	Medicine and Health Sc	ience			
	hian Faculty of Engine		cience		
	se specify):				
`	1 7/				
					_
	000411115*				
2. TYPES OF PRO					
<ul><li>Academic E</li></ul>	•				
Name of Program	me:				
(Undergraduate Pro	gramme refer to : <u>https://stu</u>	dy.utar.edu.m <u>y</u>	/undergraduate.php)		
(Postgraduate Programme refer to : <a href="https://ipsr.utar.edu.my/Programmes.php">https://ipsr.utar.edu.my/Programmes.php</a> )					
□ Internship					
	ent:				
, ,					
	re conducted in English, bu programmes are taught in C			Chinese Medicine, Chin	ese Journalism
3. DURATION OF	STUDY AT UNIVERS	SITI TUNKU	ABDUL RAHMAN		
	mester for Year:				
_	ter for Year :				
	mester for Year:				
□ Other (pleas		<del></del>			
	(month)	(vear) To	(month)	(vear)	
		_ () 5 4.7 1 5 _			
Expected date of arriv	al at UTAR:		Expected date of return	n to own country:	

Form Title: Stud	lent Exchange Progra	mme (SEP) Ir	nbound Ap	plication Form	<u> </u>	
Form Number: FM-CEE-SEP-001		Effective Date			Page No.: Page 3 of 4	
4. COURSE DETAILS (FOR ACAI	DEMIC EXCHANG	GE ONLY) '	k			
UTAR Course Code UTAR Course Desc				m (Yes/No)	Credit Transfer (Yes/No)	
217 II C C C C C C C C C C C C C C C C C C	iip doi!		aning Exa	(100/110)	Great transfer (196/146)	
*Please do not hesitate to contact us at mob	<u>ility.cee@utar.edu.my</u>	v for UTAR Co	ourse Code	e and Descript	ion.	
5. PERSONAL DETAILS						
Name as in Passport:						
(Surname in BLOCK letters)						
Home Address:						
(in BLOCK letters)						
Mailing Address:						
(in BLOCK letters)						
Date of Birth:	Gender:		1	Nationality:		
Date of Birtin.	□ Male □ Female	<u>a</u>		i vanorianty.		
Tel. No.:	WeChat / WhatsApp		Email Address:			
10.110	Troonat / Whater top	P 12.		Ziridii 7 taarot	50.	
Marital Status: Single / Married / Others		Spouse acc	ompanying	g to Malaysia:		
_		□ YES □ NO				
Passport No.:		Date of Issue:				
Place of Issue:		Date of Exp	iry:			
		<u> </u>				
Person to Contact:		Relationship:				
Tel. No.:	n case of emergency)		Email Address:			
Tel. No	el. No.:		Email Address:			
Please give details of any special needs, a	allergies dietary requi	rements or he	alth condi	tion that requi	re special attention. Please	
state nature of condition / requirement.	mergies, dietary requi	rements of the	anii condi	ilon that requi	re special attention. I lease	
6. ACADEMIC BACKGROUND						
Name of Home Institution:						
Address:						
(in BLOCK letters)						
Name of Officer to contact:		Designation	í:			
Tel. No.:		Email Addre	ess:			
10.15						
Current Programme of Study: Bachelor						
(please specify specialisation, if any)		One -1	Date			
Year of Study:		Graduation (expected)	⊔ate:			
(at the time of application) (e.		(expected)				

Form Title: Student Exchange Programme (SEP) Inbound Application Form					
Form Number: FM-CEE-SEP-001	Rev No.: 2 Ef	fective Date: 23 December 2020	Page No.: Page 4 of 4		
7. SOURCE OF FUND					
□ MoU / MoA Affiliated UTAI	R Partner				
□ Parent / Guardians					
□ Scholarship / Fellowship					
□ Self-supporting					
Name of Award / Scholarship / Sponsor	ship:				
(if applicable)  Duration and Amount of Award / Schola	arship / Sponsorship:				
(if applicable)					
8. ENGLISH PROFICIENCY*					
English Components	Excellent	Good	Poor		
English Listening Proficiency					
English Speaking Proficiency					
English Writing Proficiency					
English Reading Proficiency					
* Based on self-assessment	1				
9. DECLARATION BY APPLICA	A NIT				
		t and complete I fully up	deretand that it is my		
		t and complete. I fully un			
		entary evidence of my qua			
		ain further information where			
		s and transcript for verification			
		me or cease my enrolment	at any stage during my		
course where false or misl	•	•			
	en convicted by any c	ourt of law and will abide by	all regulations and laws		
of UTAR and Malaysia.	ر مرم ما براد من مراد در مرم المرد م	have abtained appropriate in	mmmiaatiam (if waar iwa d		
by Immigration Departmen		have obtained appropriate in	nmunisation (ii required		
			any avnances incurred		
	• I would like to participate in UTAR Buddy Programme, and I understand that any expenses incurred by me during the programme shall be borne by myself. I also agree that my personal information (e-				
		sApp ID) is to be given to UT			
man address / contact hun	ilber / WeOrlat / Wriats	sapp (D) is to be given to 01	Alt buddy.		
Name in Capital Letters:					
Signature of Applicant:					
Date:					
For Office Use Only					
					COLLECTION OF COMPLETED
Collected By:		Date:			
l					
APPROVAL BY DEAN/DIRECT	OR OF FACULTY/IN	STITUTE			
□ Approved		Date:			
<ul><li>Disapproved</li></ul>					
Signature:		Official Stamp:			