

## Universiti Tunku Abdul Rahman

Form Title : **Student Exchange Application Form (Outbound)**

Form Number : FM-DCIN-002

Rev No : 2

Effective Date : 18 April 2017

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**Universiti Tunku Abdul Rahman**  
**STUDENT EXCHANGE APPLICATION FORM**  
*(For Outbound Students)*

Passport Size  
photo

**1. PERSONAL PARTICULARS**

Name in Full			
Programme at UTAR		Faculty/ Institute	
Level of Study	Bachelor/ Master / PhD	Student ID	
	Year:_____ Semester:_____	Gender	Female / Male
I.C. No.		Contact Number	
Passport Number		Date of Expiry	
Postal Address		Email	

**2. INFORMATION ON HOST INSTITUTION**

Name of Host Institution	
Country	

**3. PERIOD OF STUDY AT HOST INSTITUTION**

Tick (✓) the appropriate box to indicate the period

<input type="checkbox"/> One Semester Duration: _____	<input type="checkbox"/> Two Semesters Duration: _____
<input type="checkbox"/> One Academic Year Duration: _____	<input type="checkbox"/> Other Duration: _____

Programme: \_\_\_\_\_ Faculty: \_\_\_\_\_

Date of commencement: \_\_\_\_\_ Expected date of return: \_\_\_\_\_

**4. STUDENTS ON INDUSTRIAL / RESEARCH (For Internship and Final Year Project only)**

Supervisor at UTAR/ Faculty			
Supervisor at Host Institution Designation & Faculty		Email	

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**5. COURSE DETAILS / CREDIT TRANSFER**

List below details of the courses / subjects you intend to do credit transfer at UTAR and the courses / subjects that you intend to study at the host institution

UTAR			Host Institution:		
Course Code	Course Description	No. of Credit Hours	Course Code	Course Description	No. of Credit Hours

**Please note:**

*\*Prior approval from UTAR is required before commencement of your study at the host institution if credit transfer is sought for the courses selected. Please consult your Dean of Faculty and if relevant, apply for leave of absence for the duration of study at the host institution.*

*\*Student who apply for credit transfer, must complete the courses/subjects at host institution with grades.*

**6. SOURCE OF FUNDS FOR DURATION OF STUDY/ STAY ABROAD**

Sponsorship    
  Scholarship/fellowship    
  Parents/guardians    
  Self-supporting

Name of Award/ Sponsor/ Scholarship : \_\_\_\_\_  
(if applicable)

Duration and Amount of Award/ Scholarship: \_\_\_\_\_  
(if applicable)

I declare that the information given is true and correct.

I declare that I am mentally and physical fit to undertake this programme.

I declare that I have obtained consent from my parents or other legal representative in joining this programme.

Signature of Applicant: \_\_\_\_\_

Date : \_\_\_\_\_

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Please return the completed application to:

**Sungai Long Campus**  
**The Division of Community and International Networking (DCInterNet)**  
**Room 1007, 10th Floor, KB Block**  
Jalan Sungai Long, Bandar Sungai Long,  
Cheras, 43000 Kajang,  
Selangor, Malaysia.

**Kampar Campus**  
**The Division of Community and International Networking (DCInterNet)**  
**Room 101C, Block F**  
Jalan Universiti, Bandar Barat,  
31900 Kampar,  
Perak, Malaysia.

E-mail: [dcinternet@utar.edu.my](mailto:dcinternet@utar.edu.my)

Tel: 603 9086 0288 (Sungai Long Campus) 605-4688888 (Kampar Campus)

**For Office Use Only**

<b>Approval by Head of Department of Faculty / Institute</b>			
<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved		
Signature		Date	
<b>Approval by Dean / Director of Faculty / Institute</b>			
<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved		
Signature		Date	
<b>Collection of Completed Form by Division of Community &amp; International Networking (DCInterNet)</b>			
Collected By		Date	

**Note:**

- The following documents must be submitted together with the application form:
1. One (1) certified copy of UTAR's latest exam transcript/ notification of results
  2. One photocopy of passport (photo and issuance date page)