

*For Office Use Application
Officer Name :

	APF		MATR ION/RE			NT F	ORM							
INSTRUCTIONS 1 Student is required to read terms and conditions carefully. 2 Please fill up the form completely.									РНОТО					
SECTION I (To be completed	d by studen		UDENT'	S PART	CULA	R								
NAME							1	1			1			
(Capital Letter)														
NAME TO APPEAR ON CARD														
MATRIC NO														
NRIC/PASSPORT NO.														
PROGRAMME								_		_				
FACULTY								_						
TELEPHONE NO								_						
			TERMS &	CONDI	IONS									
Cardholder is solely responsible chargeable to the cardholder. Cardholder is ultimateley responsible. In the case of card is stolen or RM50.00. Cardholder must wear the mat 5. The University representives solution of the University immediately. I acknowledge and agree to abide.	onsible for the lost, cardhold ric card at all hall have the ine University a	use of the er must in times.	e card and mmedietel spect the a ardholder of	d will safe ly report t matric ca ceases to	eguard i to the U	t agair niversi	nst use ity and without	by oth replace	ers. ement o	of the card is	s charge			
Signature and Name						Date//								
SECTION II (To be completed	d by Academi rtment)	ic Admin	istration	S	ECTIO	N III (1			ted by Depar	Student Ac	count a	nd		
Application Status New		Replac	ement		Total F									
Reason for Replacement						Invoice No : Receipt No: Signature & Stamp								
Verified by Admission Ass Date: /		N 1 -												
Jule /	'				Nan				,		_			
	* Appl	Date : / / * Application form to be returned to ACAD												