



**Universiti  
Malaysia  
PAHANG**  
Engineering • Technology • Creativity

**INTERNATIONAL OFFICE**

**UNIVERSITI MALAYSIA PAHANG**

Lebuhraya Tun Razak, 26300, Gambang, Kuantan

Pahang Darul Makmur

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**APPLICATION FOR STUDY ABROAD (OUTBOUND)**

(This form has to be filled by the applicant 3 months before the program started.)

**PART I : To be completed by the applicant.**

**A. NAME OF PROGRAMME : Exchange / Short Term / Internship**

**B. APPLICANT / PARTICIPANT PERSONAL DETAILS (COMPULSORY)**

Recent Passport  
Sized Photograph  
( Please write your  
name at the back of  
the photo)

Name (Mr./Mrs./Miss)			
IC No.			
Date of Birth		Age	
Place of Birth		Ethnicity	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single
Citizenship/ Nationality		Religion	
Passport Number		Mobile Number	
E-mail address			
Next of kin		Contact number	
Home address			
State & Country		Postcode	

**C. EDUCATION IN UMP (COMPULSORY)**

Faculty			
Programme of study		Matric No.	
Level Of Study	<input type="checkbox"/> Diploma <input type="checkbox"/> Bachelor <input type="checkbox"/> Masters <input type="checkbox"/> PhD	Current semester	
Current result (CGPA)		Expected year of graduation	

Academic awards obtained (please specify name of award, organiser & date received):

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**D. OTHERS (CO-CURRICULUM ACTIVITIES / SPECIAL SKILLS)**

Co-curriculum activities :
Special skills :

**E. STUDY ABROAD PROGRAMME (COMPULSORY)**

Host University / Institution Applied	
Does host university have MoU with UMP?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of mobility programme	<input type="checkbox"/> Exchange Programme (1 or 2 semesters)  <input type="checkbox"/> Short term Programme (less than 1 semester) <ul style="list-style-type: none"> <li>• Mobility Program (2 weeks or more)</li> <li>• Short Mobility (7-13 days)</li> </ul> <input type="checkbox"/> Internship Programme (work/research attachment)  <input type="checkbox"/> Others, please specify _____
Period of study (in host university)	<input type="checkbox"/> 2 semesters <input type="checkbox"/> 1 semester  Commencing _____ to _____
Please specify your research project (if relevant)	
Transfer of credits required (Please fill in the Academic Transcript Form)	<input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, Please specify each courses to be taken in host university:  _____ _____ _____

**F. FINANCIAL INFORMATION (COMPULSORY)**

How would you intend to finance your programme?

Self-sponsored     
  Home Institution     
  Sponsor

Please specify details of sponsorships (Sponsoring Body/Institution/Association):

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**G. LANGUAGE**

Native Language							
Language proficiency	English	<input type="checkbox"/>	Proficient	<input type="checkbox"/>	Moderate	<input type="checkbox"/>	Weak
	Malay	<input type="checkbox"/>	Proficient	<input type="checkbox"/>	Moderate	<input type="checkbox"/>	Weak
	Others (specify)	<input type="checkbox"/>	Proficient	<input type="checkbox"/>	Moderate	<input type="checkbox"/>	Weak
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**H. INTER-OFFICE COMMUNICATION (COMPULSORY)**

Please include the contact person from host university (international office officer/faculty mobility coordinator) who is responsible for correspondence.

Name (Mr. / Miss / Mrs.)			
Position			
Office/Department			
Correspondence address			
Phone number		Fax number	
E-mail address			

**I. INTER-OFFICE COMMUNICATION (COMPULSORY)**

Please include the contact person from UMP (international office officer/faculty mobility coordinator) who is responsible for correspondence.

Name (Mr. / Miss / Mrs.)			
Office/Department			
Position			
Correspondence address			
Phone number		Fax number	
E-mail address			

**J. FACULTY APPROVAL (DEAN'S COMMENT)**

Name			
Faculty			
Position			
Correspondence address			
Phone number		Fax number	
E-mail address			
<p><b>Faculty Approval:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved</p> <p>a) Comment:            (For credit transfer program, Dean is requested to comment on the courses applied by the students, taken in Host University)</p> <p>-----            -----            -----            -----            -----</p> <p><b>Name :</b></p> <p><b>Signature &amp; Cop :</b></p>   <p><b>Date:</b></p>			

***I hereby declare that I shall be full time registered student in Universiti Malaysia Pahang during the whole period of exchange/ mobility program.***

***I hereby declare that all information provided in this form is true. I acknowledge that Universiti Malaysia Pahang reserves the right to reject the application, to withdraw the offer, to vary or reserve any decision if any information given is found to be false or incorrect. I also agree to follow the regulation of the university and to pay all the fees that had been set by the university.***

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

Name : \_\_\_\_\_

***NOTE: Please submit 4 current colored photographs (passport size), a copy of your passport (front page only). For credit transfer program, please enclosed a copy of academic transcript.***

**PART II : To be completed by UMP International Office.**

**VERIFICATION BY THE INTERNATIONAL OFFICE DIRECTOR :**

**Comment :**

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Name :

Signature & Cop :

Date:

**APPROVAL BY THE DEPUTY VICE CHANCELLOR (ACADEMIC & INTERNATIONAL):**

**Comment :**

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Name :

Signature & Cop :

Date:

