



APPLICATION FORM
STUDENT EXCHANGE/MOBILITY
PROGRAMME (INBOUND)
UNIVERSITI MALAYSIA SARAWAK
(UNIMAS)

Affix Passport Size
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blue background

☐

PARTNER UNIVERSITY/INSTITUTION

Name of University/Institution: _____

Instructions:

- All supporting documents which has been certified must be submitted together with this application.
- Please send your application by mail or email through your home university/institution to:

UNIMAS Global
Universiti Malaysia Sarawak
3rd Floor, Chancellery Building
94300, Kota Samarahan
Sarawak Malaysia
Tel: +6082 582 1234
Fax: +6082 665 088
Email: rivy@unimas.my

SECTION 1: PERSONAL INFORMATION					
Given Name				Date of Birth	
Surname				Marital Status	
Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Occupation		
Country of Birth				Citizenship	
Passport No.				Expiry Date	
Mailing Address					
Zip Code		State		Country	
Phone No			Email		

SECTION 2: ACADEMIC PARTICULARS					
Name of Current University					
Address of Current University					
	Zip Code		State		Country
Current Degree Programme					
Area of Study					
Level of Study					
Year of Study	1 st <input type="checkbox"/>	2 nd <input type="checkbox"/>	3 rd <input type="checkbox"/>	4 th <input type="checkbox"/>	Others <input type="checkbox"/>

Academic Transcript:

Please provide an up-to-date certified copy of Academic Transcript showing all the subjects attempted, grades (including failures) and an explanation of the grading system. Applicants who submit transcripts in a language other than English must provide an officially certified translation.

SECTION 3: PROPOSED PROGRAMME			
Programme of Study	Student Exchange <input type="checkbox"/>	Short-Term Programme (with Credit) <input type="checkbox"/>	
	Short-Term Programme (with Credit) <input type="checkbox"/>	Internships <input type="checkbox"/>	
	Others (Please specify) <input type="text"/>		
Proposed Commencement			
Duration of Study	<input type="checkbox"/> 1 Semester	<input type="checkbox"/> 2 Semester	Others (Specify) <input type="text"/>
Accommodation Preference	<input type="checkbox"/> University Residential (sharing) <input type="checkbox"/> Non-University Residential		

If possible, please list at least 4 courses. Please refer to UNIMAS website (www.unimas.my) for information on academic programmes or contact UNIMAS Global.

Course Code	Course Name

SECTION 4: ENGLISH PROFICIENCY	
a. Is English your main or first language?	Yes <input type="checkbox"/> No <input type="checkbox"/>
b. Is English your current medium of academic instructions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If NO to a & b , please indicate any English language proficiency test you have taken and the result.	<input type="checkbox"/> IELTS Band:
	<input type="checkbox"/> TOEFL Score:
	Others, please specify: <hr/>
	Result:

SECTION 5: DECLARATION

I declare that the information given in this application is correct and complete.

Applicant's Signature	
Date	

SECTION 6: HOME INSTITUTION APPROVAL

Approval for Exchange/Mobility Programme

Name of Officer in Charge	
Signature of Officer in Charge	
Date	

SECTION 7: FOR UNIMAS OFFICE USE ONLY

Faculty Dean's Comment:		
Dean's Signature		Official Stamp
Date		

UNIMAS Global		
Director's Signature		Official Stamp
Date		