



PART 1 : Enrollment Information

Programme _____ leading to _____

Intake (month) _____ (year) _____ Campus _____

Previous Student ID at UCSI (If applicable) _____

PART 2 : Personal Particulars

Title _____ Surname/Family Name _____

Name _____ Date of Birth _____
(as in MyKad / Passport)

My Kad No. _____ Email Address _____

Passport No. _____ Place of Issue _____
(for international student only)

Issue Date (day) _____ (month) _____ (year) _____ Expiry date _____

Place at Birth _____ Religion _____

Marital Status _____ Gender _____

Correspondence Address _____

Postcode _____ Town/City _____ State _____

Country _____ Nationality _____

Home Telephone No. _____ Mobile Phone No. _____

Permanent Home Address _____

Postcode _____ Town/City _____ State _____

Country _____

Do you have any disability? Yes No If Yes (Please specify) _____

Do you have any medical condition? Yes No If Yes (Please specify) _____

For International Student Only

Are you currently a permanent resident of Malaysia? Yes No PR IC No _____

Are you currently holding any Malaysian Immigration Pass / Visa? Yes No Type _____ Expiry Date _____

Have you been registered with another institution in Malaysia? Yes No Institution Name _____

Do you require Accommodations within the Hostels? Yes No Counselors _____

(If selected, a booking deposit of RM 1,000.00 shall be payable along with the registration fee)

PART 3 : Parent's / Guardian's Data

Relationship _____ Nationality _____
Title _____ Surname/Family Name _____
Name (as in Mykad No./ Passport No.) _____

Permanent Home Address _____

Postcode _____ Town/City _____ State _____

Country _____ Email Address _____

Home Telephone No. _____ Mobile Phone No. _____

Sibling(s) currently enrolled at UCSI University

Name _____ Student ID _____

PART 4 : Educational Background

Name of School _____ Telephone No. _____

Address _____

Highest Academic Qualification SPM O-Level STPM A-Level UEC SAM CPU Matriculation Diploma IB

Others (Please specify) _____ Year of Examination _____ Overall Grade/ Aggregate _____

Subjects and Results

No	Subject	Grade	No	Subject	Grade
01.	_____	_____	06.	_____	_____
02.	_____	_____	07.	_____	_____
03.	_____	_____	08.	_____	_____
04.	_____	_____	09.	_____	_____
05.	_____	_____	10.	_____	_____

Note: Please attach certified true copies of examination certificates and result transcripts.

English Proficiency

Qualification _____ Score _____

PART 5 : Academic Awards / Other Qualifications

No	Name of Examination / Award	Grade / Award
01.	_____	_____
02.	_____	_____
03.	_____	_____

Note: Please attach certified true copies of examination certificates and result transcripts.

PART 6 : Employment History

No	Name of Employer Organisation	Position	From Date	To Date
01.	_____	_____	_____	_____
02.	_____	_____	_____	_____
03.	_____	_____	_____	_____

REFUND POLICIES AND PROCEDURES

APPLICABLE TO ALL STUDENTS

1. I hereby agree that the Registration Fee / Application fee (inclusive EMGS payment) paid is, under any circumstances, NON REFUNDABLE.
2. I hereby agree that all initial fees paid as stipulated in the Letter of Acceptance / Conditional Letter of Offer / Conditional Letter of Acceptance are not refundable.
3. I hereby agree that once the initial fees are fully utilized, fees will be charged based on the Approved Course Selection.
4. I hereby agree that in the event I drop all the subjects before the ADD/DROP deadline and subsequently follow up with a withdrawal from UCSI University, the University will charge back the full fees based on the initial Approved Course Selection.
5. I hereby agree that UCSI University will refund the following: Caution Fee; Library Deposit; International Student Deposit and Security Bond. However, this is provided that no rules or regulations have been breached and I do not have any outstanding fee with the University.
6. For the UCSI 'Doctor of Medicine' and 'Bachelor of Pharmacy (Hons)' degree programmes, there is a strict NO REFUND policy for all fees paid. However, for Applicants that are unable to secure/obtain a seat for the 'Doctor of Medicine' and/or 'Bachelor of Pharmacy (Hons)' degree programmes shall be entitled to a maximum refund of RM250.00 from their registration fees.
7. I hereby agree that in the event of graduation or in the event of a withdrawal the respective forms must be submitted within a maximum of 2 semesters from the event for Refundable Deposits as per paragraph 5 above. All applications should be duly submitted in the prescribed form and not in any other manner whatsoever.
8. I hereby agree that at all times, it is imperative that all rules and regulations are strictly adhered to, failing with UCSI shall forfeit all Refundable Deposits and the said deposits may be required to be paid once again, where applicable.
9. I hereby agree that in the event that I fail to settle my fees in accordance to the respective due date, I shall be liable to pay the late payment charges that shall be levied accordingly by UCSI.

Signature of Applicant

APPLICABLE TO MALAYSIAN STUDENTS ONLY

1. In the event that a refund is requested, a 50% refund of initial tuition fees (new students) or Approved Course Selection (existing students) provided withdrawal from the programme is made/submitted before the commencement of the classes, with the exception of Saturday, Sunday and Public Holidays. In the event I have not paid the fees, 50% of the fees based on the initial tuition fees or Approved Course Selection are chargeable. UCSI University has every right to use the Refundable Deposits.
2. To offset the outstanding due to the University. In the event that a refund is requested, a 30% refund of tuition fees provided withdrawal from the programme is made within seven (7) days from the commencement of the classes. In the event I have not paid the fees, 70% of the fees based on the initial Approved Course Selection are chargeable. UCSI University has every right to use the Refundable Deposits to offset the outstanding due to the University.
3. There shall be NO refund of tuition fees if the withdrawal is done, anytime later and/or not in compliance with the fore-going conditions. All applications should be duly submitted in the prescribed form and not in any other manner whatsoever.

Signature of Applicant

DECLARATION BY APPLICANT

I hereby understand and agree that it shall be my responsibility to know and abide with all relevant and applicable rules and regulations of UCSI. I hereby declare that all information herein provided is complete, accurate, true to the best of my knowledge. I also hereby agree that UCSI reserves the right to verify the same and I also agree that UCSI reserves the right to vary or reverse any decision in respect to my registration in the event that the said information is found to be untrue, incorrect or incomplete. I also agree that in the event that UCSI shall forfeit that said fees, I shall not have any claim whatsoever against UCSI. I also agree that UCSI reserves the right to alter, amend, change or modify the current published fees and all fees payable shall be published at the time of payment.

Name of Applicant _____

MyKad No. _____

Date _____

Signature of Applicant

Date _____

Signature of Guardian / Parent



UCSI EDUCATION SDN BHD (185479-U)

KUALA LUMPUR CAMPUS DU020(W)

NO.1, JALAN MENARA GADING, UCSI HEIGHTS (TAMAN CONNAUGHT) CHERAS, 56000 KUALA LUMPUR, MALAYSIA.

T +(603) 9101 8880 F +(603) 9102 2614

Latitude: 3.079548 (3° 4' 46.37" N) Longitude: 101.733216 (101° 43' 59.58" E)

SARAWAK CAMPUS DU020-02(Q)

LOT 2864 (P/L 1319), BLOCK 7, MUARA TABUAN LAND DISTRICT, ISTHMUS, TANJONG SEBERANG PENDING POINT, SEJINGKAT, 93450 KUCHING, SARAWAK, MALAYSIA.

T +(6082) 596 965 F +(6082) 596 975

Latitude: 1.564448 (1°33'52.0"N) Longitude: 110.405258 (110°24'18.9"E)

TERENGGANU CAMPUS DU020-01(T)

BUKIT KHOR, PT 11065, MUKIM RUSILA, 21600 MARANG, TERENGGANU, MALAYSIA.

T +(603) 628 1880 / 1889 F +(603) 628 1885

Latitude: 5.216519 (5° 12' 59.47" N) Longitude: 103.161621 (103° 9' 41.84" E)

enquiries@ucsiuniversity.edu.my | ucsiuniversity.edu.my