UUM/SAC/04

OFF- CAMPUS ACCOMMODATION APPLICATION FORM

Student Accommodation Centre
Universiti Utara Malaysia
06010 UUM Sintok, Kedah Darulaman

APPLICANT DETAILS (*Please complete in BLOCK letters*)

Full Name			
Matrik No		**IC / Passport No.**	
Current DPP			
Programme			
Gender	☐ **Male** ☐ **Female**	**Semester**	
Nationality		**Contact No.**	
Email Address		**Maritial status**	
Permanent Address			
Off-Campus Address			
Name and address of contact person in case of emergencies	**Name:**		
	Address:		

I hereby, confirm that all information given is complete and correct, thus Student Accommodation Centre Management reserves a right to reject my application if the information given incomplete.

Student's Signature: …… Date: ……..

FATHER/MOTHER/HUSBAND/WIFE

NAMA : ……
I/C NO: ……..
RELATIONSHIP : …….

I hereby declare that the information given above is true.

……..
( )
Signature

I hereby approved/ not approved the application for staying off-campus

……..
Signature/Chop
Deputy Vice Chancellor
Students Affairs & Alumni Department
Student Accommodation Centre
UNIVERSITI UTARA MALAYSIA