

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.	
Programme			
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Semester
Nationality			Contact No.
Email Address			Marital 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**