

 INTERNATIONAL MOBILITY & COLLABORATION CENTRE (IMCC)	Document Code: IMCC/BI (P1)	References No: IMCC/BI
	KAWAN REGISTRATION	Date:

Please complete the form based on the categories of person/persons acquiring students. The completed form should be endorsed by the Head of Department in order to enable incentive payment to be approved.

PART I: FOR THE ACTION OF APPLICANT/KAWAN			
A. Applicant Information			
A.1. Identification Card No/ Passport		A.7 School/Department	
A.2. Matric No		A.8 Year Of Study	
A.3. Name		A.9 Nationality	
A.4. Mailing Address			
A.5. Programme/Name Of Study (Title)	Diploma/First Degree <input type="checkbox"/> Programme: _____ Masters <input type="checkbox"/> Programme: _____ PhD/Equivalent <input type="checkbox"/> Programme: _____		
A.6. Contact Information	Telephone No: _____ Email Address: _____ Bank Account No: _____ (Please attach bank statement)		

Signature : _____ Date: _____

PART II: FOR ATTESTATION BY SCHOOL/ DEPARTMENT

A. Confirmation Information *KAWAN*

1. I.....
 Head Of Department/School..... hereby **CONFIRM** that the student as mentioned in part I is an active student for Academic Session

Name And Designation Head Of Department / School (Rubber Stamp HOD):

Signature :

PART III: FOR THE ACTION OF INTERNATIONAL MOBILITY & COLLABORATION CENTRE

The above information has been checked/ authenticated and the decision is:

- Approved Appointed
 Not Approved Elaboration/Reason _____

Name and Designation :

Signature :

Date :

* All rules are subject to the university regulations

** Attachment : 1) Local bank statement
 : 2) Matric Card Copy (front & back)