



PUSAT PENGURUSAN AKADEMIK
PERMOHONAN PENGECCUALIAN KURSUS
Centre for Academic Management
Application for Course Exemption

Bahagian A: Maklumat Diri Pelajar
Part A: Student's Detail

Nama (Name)			
No. Pendaftaran (Registration Number)			
No. Telefon (Telephone Number)			
Email (E-mail)			
Fakulti / Institut (Faculty / Institute)			
Program Pengajian (Program)	Sarjana (Masters)		Doktor Falsafah (Doctor of Philosophy)
Bentuk Pendaftaran (Type of registration)	Sepenuh Masa (Full Time)		Separuh Masa (Part Time)

Pusat Pengajian/Jabatan : _____
(School / Department)

Semester/Sesi : _____
(Semester/Session)

Kod Kursus (Course Code)	Nama Kursus (Course Name)

Alasan (Reason) :

(Sila sertakan dalinan keputusan peperiksaan yang disahkan jika pernah mengikuti kursus yang sama / setara di institut lain)
(please enclosed a certified copy of your exam result if already sit for this course before at other institutional)

Tandatangan : _____
(Signature)

Tarikh : _____
(Date)

Bahagian B : Kelulusan Fakulti / Institut
(Part B : Approval from Faculty / Institute)

Permohonan : Diluluskan (Approve) / Tidak diluluskan (Not Approve)

Tandatangan : _____
(Signature)

Tarikh : _____
(Date)

Nama : _____

[*Potong yang tidak berkenaan]
