

اونيۈرسيتي تيكنولوكي بروني

Affix recent passport sized photograph

UNIVERSITI TEKNOLOGI BRUNEI

Tel : +673-261020 Fax : +673-2461035/6 Website : www.utb.edu.bn

INBOUND STUDENT EXCHANGE PROGRAMME APPLICATION FORM

| Checklist : | | | |
|--------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------|--|
| | Resume | | |
| | Cover Letter by Faculty (Supporting letter | | |
| | 1 color passport sized photograph (affix in front of application form) | | |
| | Latest Result Slip/Transcripts | | |
| | Copy of Identity Card / Passport | | |
| | Letter from Sponsor (if applicable) | | |
| | Parental / Guardian Consent Letter | | |
| Note: | Note: Handwritten is permissible only for section H, I, J and K. | | |
| | | | |
| A. TYPE OF PROGRAMME (Tick () either one) | | | |
| | | Study at university abroad for one or two (maximum) | |

| | A. If PE OF PROGRAMME ($\Pi c K (\Box)$ either one) | | |
|--|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--|
| | Study Abroad/ | Study at university abroad for one or two (maximum) | |
| | Student Exchange | semester (s) and take courses in regular semester with credit transfer opportunity | |
| | Internship /Research Attachment/ Scientific Visit | Join research study or internship under the supervision of an academic staff at universities or industries abroad | |

| B. APPLICANT DETAILS | | |
|-------------------------------|------------------------------|--|
| First Name: | Religion : | |
| Surname : | | |
| Date of Birth : | Nationality : | |
| Gender : | Country of Birth: | |
| IC Number / Passport Number : | Country of Residence : | |
| Expiry Date: | | |
| Correspondence Address: | Home Address (if different): | |
| | | |
| | | |
| | | |
| Tel No : | Tel No : | |
| Email : | Email : | |
| Next of Kin : | Emergency Contact : | |
| | | |
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| C. EDUCATIO | N & CO-CURRICULUM |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| Sending Institution (Name and Full Address): | Current Semester/ Full Semester : (i.e : 4/8 semesters) |
| Field of Study : | Expected Graduation Year : |
| Programme : | Current Results: |
| Co-curriculum activities : | |
| Special activities : | |
| Achievement (Academic & Co- curriculum) | |
| Special Skills / Soft Skills: | |
| D. MOBILITY PRO | OGRAMME INFORMATION |
| Name of Programme (please specify if any) : | |
| Duration of Stay: | Programme Date : Commencing from to |
| Briefly state the reasons why you wish to study ab | |
| Details of the Proposed Study Programme (equip termination of terminatio of termination | uivalent for credit transfer) Host University |
| Module Code/Course Title Credi Value | t Module Code/Course Title Credit |
| | |
| | |
| | |
| | |
| Note: Please insert row for more courses (if nece | ssary) |
| Course Approval by Faculty : | |
| Name: | |
| Designation: | |

| Research Topic/ Research field (for internship/ research attachment) : | | | |
|------------------------------------------------------------------------|------------------------|-------------------------------------|--|
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| Study Plan (Describe your study plan and activitie | es at university abroa | ad): | |
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| E. FUNDI | NG/SPONSORSH | [P | |
| | | | |
| Type of Funding / Sponsorship * | | | |
| Self-sponsored | | | |
| Home Institution | | | |
| Other | | | |
| | | | |
| F. ENGLISH LAN IELTS Score : | IGUAGE QUALIFI | CATION | |
| IELIS Score : | TOEFL Score : | | |
| Date Taken: | Date Taken: | | |
| | | | |
| Other English Language Qualification: | | | |
| | | | |
| Name of Qualification: | Date Taken: | Score Achieved: | |
| | | | |
| | | | |
| | PECIAL NEEDS | | |
| Please outline any special needs or support that y | | der to fully undertake your studies | |
| as a consequence of any disability or medical condition: | | | |
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| H. ACADEMIC A | DVISOR/ SUPERVSIOR | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--|
| Name of Academic Advisor/ Supervisor: | | |
| Email : | Phone Number : | |
| Recommendation (brief on students' background to support the application): | | |
| | | |
| | | |
| | | |
| Signature : | Designation Stamp : | |
| Date : I. HOME UNIVERSITY FACULT | Y APPROVAL (DEAN/ DEPUTY DEAN) | |
| I. HOME UNIVERSITY FACULTY APPROVAL (DEAN/ DEPUTY DEAN) Approved / Disapproved Comments : | | |
| | | |
| Signature : Date: | Designation Stamp : | |
| J. INTER-OFF | ICE COMMUNICATION | |
| Please include the contact person from the home university (international affairs officer/student exchange coordinator) who is responsible for correspondence. | | |
| Name (Mr./Miss/Mrs.) : | | |
| Office/Department: | Position: | |
| Correspondence Address: | | |
| | Fax number: | |
| E-mail address: | _ | |

| K. APPLICANT DECLARATION | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--|--|
| <i>I hereby declare that the information provided in this form is true. I undertake to observe the University's Rules and Regulations and to ensure payment of all fees and other liabilities.</i> | | | |
| I acknowledge that Universiti Teknologi Brunei reserves the right to vary or reserve any decision regarding admission or enrollment made on the basis of the given information. | | | |
| Applicant's signature : | Name : | | |
| Date : | | | |
| | | | |

For Universiti Teknologi Brunei Use

The above mentioned student is:

| | Tick |
|---------------------------------------------------------|------|
| Unconditionally accepted at Universiti Teknologi Brunei | |
| Conditionally accepted at Universiti Teknologi Brunei | |
| Conditions are: | |
| | |
| Not accented at Universiti Teknologi Prunei | |
| Not accepted at Universiti Teknologi Brunei | |
| | |

Registrar's Office Use:

Student Exchange Advisor/Agent presented the application Yes/No

Advisor's name

| | Date |
|----------------------------------------------------------|------|
| Application form received at Universiti Teknologi Brunei | |
| Application form sent to School/Faculty | |
| Decision received from School/Faculty | |
| Decision sent to applicant | |
| Advisor/Agent informed of decision (if applicable) | |