

D. LANGUAGE AND SKILLS PROFICIENCIES				E. CREDIT TRANSFER /COURSE EXEMPTION REQUEST
No.	Type of Examination Completed	Date Completed	Score/ Point	
1	MUET			<input type="checkbox"/> If yes , please complete and submit the MUST Course Transfer/Exemption Form by the end of the 2 nd week of registration. <i>(Please attach certified copies of the original transcript and syllabus of the previous programme)</i>
2	TOEFL			
3	IELTS			
4	GCE (A' Level)			
5	Others (specify):			
				<input type="checkbox"/> No, I am not requesting for any credit transfer or exemption.

F. FINANCING ARRANGEMENT:			
<input type="checkbox"/>	Self-funding	<input type="checkbox"/>	Scholarship/Sponsorship
<input type="checkbox"/>	Study Loan	<input type="checkbox"/>	PTPTN; <i>Please liaise with Student Accounts, Registrar's Office to apply.</i>
<input type="checkbox"/>	Others (please specify):		

G. PAYMENTS: <i>(To be completed by Students Accounts Executive)</i>		PAID AMOUNT (RM)	DATE PAID/TO BE PAID
1	International Security fee		
2	Total Tuition fee		
3	Registration fee		
4	Resource fee		
5	Programme Security Deposit		
Sub-total			
6	Balance to be paid (by student):		
TOTAL AMOUNT PAID DURING REGISTRATION			

H. DECLARATION:	
<p>I hereby declare that all information and documents provided are true and correct. I understand and accept that my registration at MUST can be terminated any time if the information and documents that I have provided are false and incorrect. I also agree to abide to all the binding rules and regulations, and policies and procedures of MUST.</p>	
<hr style="width: 30%; margin: 0 auto;"/> Applicant's Signature	<hr style="width: 30%; margin: 0 auto;"/> Date

FOR MUST REGISTRAR'S OFFICE USE ONLY										Completed by (name):	Signature	
<input type="checkbox"/>	Registration date:	d	d	m	m	y	y	y	y			
<input type="checkbox"/>	Student intake date:			m	m	y	y	y	y			
<input type="checkbox"/>	Student ID number:	D	1	2	3	4	5	6	7	8		
<input type="checkbox"/>	Student Accounts section completed.											