



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

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

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

Pusat Pengajian/Jabatan : \_\_\_\_\_  
(School / Department)

Semester/Sesi : \_\_\_\_\_  
(Semester / Session)

<b>Kod Kursus (Course Code)</b>	<b>Nama Kursus (Course Name)</b>

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]

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