

To all applicants

Please read the admission requirements carefully before filling up the APPLICATION FORM and ensure all information provided is accurate before submitting the form.

While filling in the form, please pay attention to the following:

Fill in the form in block letters using a **black pen** or a **typewriter**;

All sections must be filled in. State "not applicable" wherever necessary.

Please address your application to the respective Graduate School as below:

Dean
GHAZALI SHAFIE GRADUATE SCHOOL OF GOVERNMENT
Universiti Utara Malaysia
06010 Sintok Kedah
Malaysia

Dean
Ghazali Shafie Graduate School of Government

SEMESTER:

SESSION: (e.g.: 2017/2018)

Please attach recent passport-size photograph here

1

PROGRAMME DETAILS

Name of Programme

School

Thesis / Project / Dissertation Supervisor* :

Specialization* :

Research Title * :

Current CGPA (coursework / dissertation programme only):

Mode of Studies **: Full- time Part-time

Programme Structure **: Coursework Coursework & Dissertation Research

* If applicable (research-based programme or currently doing project /dissertation component).

** Note: Please tick () whichever applicable.

2

PERSONAL DETAILS

Full Name (As per I.C./Passport): _____

Matric ID No.: _____

Identity Card No.(NRIC): _____

Passport No: _____

Date of Birth: ____ (DD) / ____ (M) / ____ (Y)

Place of Birth: _____

Gender*: Male Female

Age: _____

Religion: _____

Race: _____

Nationality: _____

Marital Status*: Single

Married

Widow

Permanent Address:

Mailing Address:

Postcode : _____ Town : _____

Postcode : _____ Town : _____

State : _____ Country : _____

State : _____ Country : _____

Tel. No : _____ (H) _____ (O) _____ (H/P)

E-mail : _____

**Note: Please tick () whichever applicable.*

3

CONTACT PERSON

Person to be notified in case of emergency: _____

Address: _____

Tel. No. : _____ Relationship: _____

4

EMPLOYMENT DETAIL/EXPERIENCE*Previous position (Working experience after obtaining First / Graduate Degree, if any)*

<i>Name of Position</i>	<i>Employer's name and address</i>	<i>From – To</i>	<i>Length of Service</i>

5

ACADEMIC BACKGROUND

Name and address of Institution	Year Attended	Diploma/Degree Obtained	Date Of Graduation	Class/CGPA

6**PROFESSIONAL QUALIFICATION**

Qualification	Year Awarded	Awarded by

7**PROFESSIONAL PUBLICATION (Related to your current programme)**

Title of Book/Journal	Year of Publication	Name and location of Publication

8 FINANCIAL SUPPORT/ GUARANTEE

Please indicate your source of financial support

- Employer / government
- Study loan fund
- Research Grant
- Self-support

Name and address of person/organization paying your fees

9 ACADEMIC REFEREE (Name one [1])

The academic referee must comprise of those who know the applicant in terms of his/her academic performance [e.g.: Dean, Supervisor, and Lecturer] and should not have any personal acquaintances or relatives

Name : _____

Address : _____

Tel. No : _____

Official Position: _____

***PLEASE ATTACH AN ABSTRACT OF YOUR RESEARCH PROPOSAL
(for research-based programme only)**

10 **DECLARATION**

I hereby certify that the above information and documents enclosed is true and complete. Universiti Utara Malaysia reserves the right to reject this application if the information given is false and/or incomplete.

Applicant's Signature

Date

THESIS SUPERVISOR / REFEREE REPORT

This report is **CONFIDENTIAL** and must be sealed by the referees and forward the envelope to the applicant to be submitted together with the application form

PART A : TO BE COMPLETED BY THE APPLICANT

Name : _____

Programme of Studies : _____

Place of Studies : _____

Mode of studies * : [] Full- time [] Part-time [] Distance Learning

Programme Structure : [] Research [] Coursework [] Coursework & Thesis

PART B : TO BE COMPLETED BY THE THESIS SUPERVISOR / REFEREE

Name : _____

Official Position : _____

Employer's name and address: _____

Postcode : _____

Town : _____ State: _____ Country : _____

Tel. No. : _____ Fax No. : _____ E-mail : _____

f) How do you rate the applicant on each of the following? Please tick whichever appropriate.

	Excellent	Very Good	Good	Average	Poor
i) Intellectual ability					
ii) Maturity and emotional stability					
iii) Motivation					
iv) General Knowledge					

v) Initiative

vi) Ability to cooperate

vii) Responsibility

Your Recommendation

Recommended

Not recommended

**Referee's Signature &
Official Stamp**

Date

APPLICATION CHECK LIST

Please tick in the column for the documents which are enclosed

No.	Documents required	Tick
1.	Complete and signed application form	<input type="checkbox"/>
2.	Two (2) copies of recent colour photographs, and one is fixed to the application form	<input type="checkbox"/>
3.	Certified copy of Identity Card / Passport and Matric Card	<input type="checkbox"/>
4.	One (1) copies of referee form from one (1) referee.	<input type="checkbox"/>
5.	An abstract of your research proposal for applicants doing full research only (up to 300 words).	<input type="checkbox"/>

NAME	
-------------	--

PROGRAMME	
------------------	--

SCHOOL	
---------------	--

SIGNATURE	
------------------	--