



APPLICATION FOR TRANSFER CREDIT / EXEMPTIONS OF COURSES

Semester Session /

Reminder: Application should be made to the Dean of the Kulliyah/Institute latest by the end of the student's FIRST regular semester of studies at the IIUM.

SECTION A: STUDENT

Name:		Matric No: G
Kulliyah:	Programme:	Other Prog:
Email:	Contact No:	Study Status:

For "Exemption", please fill Intended Course Only.

No	Previous Course Code	Previous Course Title
1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
2	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
3	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
4	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

*Previous course no. 1 should be the course that is similar/equivalent to Intended course no. 1.

No	Intended Course Code	Intended Course Title
1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
2	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
3	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
4	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

CANDIDATE'S ACKNOWLEDGEMENT

I have read and understood the terms and conditions before submitting this form. Enclosed are my transcript, course description and other related documents for consideration.

Date:	Signature:
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SECTION B: HEAD OF DEPARTMENT Recommendation

The candidate has met all the requirements stipulated in the PG Regulations. Therefore, the department decided to *RECOMMEND/NOT RECOMMEND his/her *EXEMPTION/TRANSFER OF CREDIT.

Date:	Signature & Stamp:
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SECTION C: DEPUTY DEAN (POSTGRADUATE & RESEARCH)/DEPUTY DIRECTOR OF KULLIYAH/INSTITUTE Approval

Based on the department's recommendation (if any), Kulliyah/Institute *APPROVES/ DOES NOT APPROVE his/her application.

Date:	Signature & Stamp:
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CENTRE FOR POSTGRADUATE OFFICE USE ONLY

Received Date:	UCPS No.
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