



IIUM Centre for Continuing Education (ICCE)

CHANGE OF INFORMATION IN PERSONAL BIODATA

Name: _____

Matric No.: _____

Programme: _____

Centre: **Gombak/Penang/Sarawak**

Phone No.: _____

Email: _____

Changes (please tick (/) which is necessary and state accordingly)

Address: _____

Phone no.: _____

Email: _____

Others (please specify):

Student's Signature: _____

Date of Application: _____

****This form can be send by hand to ICCE or fax to 03-61965778**