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|  | **PUSAT PENGAJIAN BAHASA, LITERASI DAN TERJEMAHAN**  SCHOOL OF LANGUAGES, LITERACIES AND TRANSLATION | |
|  | Tel : +604-653 3383 / 3396 / 4881 E-mail: ppblt\_courses@usm.my | |
|  | | |
| **SHORT TERM COURSES**  REGISTRATION FORM | | |
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| Title: | | Mr. [ ] Ms. [ ] |
| Full Name: | |  |
| I/C or Passport No.:  *(please attach a copy)* | |  |
| Nationality: | |  |
| Address: | |  |
| Contact No.: | | Mobile:  Office/Residence: |
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Please use ONE form for each course. Tick [√] where applicable.

Tuition fee for each course is RM600 (non-refundable).

**Method of Payment**

Beneficiary : USAINS HOLDING SDN. BHD.

Bank Name : Am Bank (M) Berhad

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*The remittance information and registration form must be submitted to the General Office of the School of Languages, Literacies and Translation, Universiti Sains Malaysia.*

**Courses**

|  |  |  |
| --- | --- | --- |
|  | Basic Conversational Arabic I |  |
|  | Basic Conversational Chinese I |  |
|  | Basic Conversational Japanese I |  |
|  | Basic Conversational Spanish I |  |
|  | Basic Conversational German I |  |
|  | Basic Conversational French I |  |
|  | Basic Conversational Korean I |  |
|  | Basic Conversational Thai I |  |
|  | Basic Conversational Tamil I |  |

**Declaration**

I hereby declare that the information provided is true and that my admission can be revoked if found to be otherwise. I understand the terms and conditions of the course and agree to abide by the rules and regulations of Universiti Sains Malaysia.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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