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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.

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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**

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| --- | --- | --- |
|  | 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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Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_