UTM
UNIVERSITI TEKNOLOGI MALAYSIA

# COURSE REGISTRATION FORM

**PLEASE READ CAREFULLY, REFER TO THE GUIDELINES**

**UTM.E/3-1**
**(Amendment 1/08)**

Student's Name: _____
(In BLOCK letters and as stated in Identity Card/Passport)

Matric Card No. : | | | | | | | | | | Session/Semester : | | | | | | | | | | |

Identity Card/ Passport No. : | | | | | | | | | | | | | Total Credit Transferred : | | | |

Year/Program : | | | | | Email : _____

Please fill in the boxes clearly and correctly. If you are registering for more than 12 courses, please use two forms. Fill the code 'UM' in the status column for Repeat Course, 'HW' for the Compulsory Attendance 'HS' for Attendance Only 'HWUM' Compulsory Attendance Repeat Course.

| NO. | COURSE CODE | | | | | | | | SECTION | | STATUS | | | | CREDIT | | LECTURER'S SIGNATURE |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. | | | | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | | | | | |
| 7. | | | | | | | | | | | | | | | | | |
| 8. | | | | | | | | | | | | | | | | | |
| 9. | | | | | | | | | | | | | | | | | |
| 10. | | | | | | | | | | | | | | | | | |
| 11. | | | | | | | | | | | | | | | | | |
| 12. | | | | | | | | | | | | | | | | | |
| **Total Credit (Exclusive of 'HS' courses)** | | | | | | | | | | | | | | | | | |

Mailing Address : | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Postcode | | | | | | Town or State | | | | | | | | | | | | | | | | | | | | | | |

I intend to register for the courses above.

_____
(Student's Signature)

Mobile Phone No : _____

Date: _____/_____/_____

Agree/Disagree

_____
(Academic Advisor's or Supervisor's Signature)

Name: _____

Tel. Extension: _____

Date: _____/_____/_____

**IF THE ACADEMIC ADVISOR OR SUPERVISOR DISAGREE**

Dean's/Deputy Dean's of Academic Decision — Approved/Not Approved

Signature _____ Date _____/_____/_____

*(1st copy – Faculty Office, 2nd copy – Academic Advisor, 3rd copy – Student)*