



MINISTRY OF EDUCATION AND CULTURE
UNIVERSITAS NEGERI MALANG (UM)
OFFICE OF INTERNATIONAL AFFAIRS

Jalan Semarang No. 5, Malang 65145
Phone: +62 (0) 341 684759/ +62 (0) 341 551312 ext. 160
Email: oia@um.ac.id; Web: oia.um.ac.id; um.ac.id/en

Declaration

I, the undersigned below:

Name : RAKOTOARIVELO Tiana Nantenaina
Place/Date of Birth : 17 march 1995 at Antananarivo Madagascar
Gender : Female
Passport Number : A16X57577
Email : nanakrakotoarivele3@gmail.com
Mobile/Phone Number : 082119946277
Home Address : Jl. Cihurug no. 15 E Sebeloa Cihurug Bandung
Malang Address : Universitas Negeri Malang Jl. Semarang No. 5 Malang

Affirm that

1. I will be obliged to regulation and laws in Indonesia.
2. I will also not do any paid jobs or political parties during my study at State University of Malang/ Universitas Negeri Malang (UM).
3. I will comply with administrative and academic rules established by State University of Malang/ Universitas Negeri Malang (UM).
4. I will not drive motorized vehicles during stay in Indonesia without authorized driving license. Any injuries caused by reckless driving or accident will not be covered by University
5. I will be responsible for my own passport and visa, I will also give my passport 2 (two) weeks before expiry date of my visa to OIA office of UM. And also I will cover all costs related to immigration matters, including overstay.

I hereby certify that the information provided in this application is correct and accurate. I acknowledge that any incorrect or incomplete information will render this application and may result in cancellation of my offer and/or my enrolment. I understand that State University of Malang/ Universitas Negeri Malang (UM) reserves the right to vary or reverse any decision regarding admission and enrolment made on the basis of incorrect or incomplete information.

Date 30 April 2020
(dd/mm/yy)

Signature

RAKOTOARIVELO Tiana Nantenaina
(full name)