

(full name)

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

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Declaration

I, the undersigned below:	
Name	Miss Aurassaya Palamee
Place/Date of Birth	: Bangkok, Thailand / 3rd August 1996
Gender	: Female
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Malang Address	: Jln. Raya Tlogomas Ngelo gg 150 nmr 10h Malang Jawa Timur Indonesia.
 I will be obliged to regulation and laws in Indonesia. I will also not do any paid jobs or political parties during my study at State University of Malang/ Universitas Negeri Malang (UM). I will comply with administrative and academic rules established by State University of Malang/ Universitas Negeri Malang (UM). 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 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/ <i>Universitas Negeri Malang (UM)</i> reserves the right to vary or reverse any decision regarding admission and enrolment made on the basis of incorrect or incomplete information.	
Date(dd/mm/yy)	
Signature	