

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

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Declaration

I, the undersigned below:	
Name	BISI Kanwal Rusab
Place/Date of Birth	Haripur, KP, Pakistan / 25.02.1982
Gender	Female
Passport Number	AB9036123
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Home Address	Doctor Hospital Street, Phul Ghulab Road, Mansehra Road Abbottabad, KP, Pakistan
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.

Bibi Kanwal Rusas

(full pame)