

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

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Declaration

I, the undersigned below:	
Name	Marian BOULOUD
Place/Date of Birth	17/05/1999, Nococco, Tetouan
Gender	Eemale
Passport Number	UK 62 93740
Email	: maboua oud a gmail com
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Home Address	El Amine Residence, AV, FAR, Tetouan, Morocco
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 <u>26/04/2020</u> (dd/mm/yy)

Signature