

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

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Declaration

I, the undersigned below:

PHAM CHE HOANG LY Name : Khanh Hoa Province, Viet Nam Nation 106-01-1997 Place/Date of Birth Female Gender C2489652 Passport Number : pham che boarg ly 76 @ gmail.com Email : (+84) 389 660 509 Mobile/Phone Number : 46/10/14 Naugen Cun Van Street, Birth Thanh District, to Chi Minh City Home Address 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 2,9 / 0 4 / 2.0 (dd/mm/yy)

Signature

Phan Che Hoang by