

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

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## Declaration

i, the undersigned below.	
Name	: Didorali
Place/Date of Birth	. Tasikistan / May 22, 1995
Gender	. Male
Passport Number	400031358
Email	: didorali 9595@mail.ry
Mobile/Phone Number	: +86 155 24559190
Home Address	. 217 Jianshan Street, Shahekou, Dalian Liaoning Int Dorm 120
Malang Address	:

## Affirm that

- 1. 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).
- 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
- 1 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 20/03/2020 (dd/mm/yy)

Signature Per

Doronshoev Didorali

(full name)