

**UNIVERSITI KUALA LUMPUR**  
**APPLICATION FORM**  
**UniKL INTERNATIONAL BUDDIES**

Please Insert  
Current Photo

A. DETAILS OF STUDENT	
Full name as per I/C:	
Campus:	
Programme:	Level: Bachelor/Master
ID No. :	Mobile No. :
No. of semester to be completed:	Gender: Male/Female
Email Address:	
Current Address:	
<p>1. Do you prefer to be a Buddy for?  <i>Tick (✓) your preference (You can select more than one)</i></p> <p style="text-align: center;"> <input type="checkbox"/> Full Semester Mobility                <input type="checkbox"/> Customized/Short Mobility Programme                <input type="checkbox"/> Both         </p> <p><i><b>Full-Semester Mobility Programme</b> is a programme whereby a student from a Partner University is enrolled in UniKL, either for enrolling in subjects, doing internship or conducting a research/ project with a minimum duration of one month to a maximum of two full semesters consecutively.</i></p> <p><i><b>Customized Short-Term Mobility Programme</b> is a tailor-made programme based on request from Partner Universities. It usually involves a group of students undergoing a specific programme with a minimum duration of 5 activity days, until a maximum period of one month.</i></p> <p>2. For full semester mobility, which nationality do you prefer?  <i>(You can select more than one)</i></p> <p style="text-align: center;"> <input type="checkbox"/> All nationalities              <input type="checkbox"/> Austria              <input type="checkbox"/> Belgium              <input type="checkbox"/> Denmark              <input type="checkbox"/> France  <input type="checkbox"/> Germany              <input type="checkbox"/> India              <input type="checkbox"/> Indonesia              <input type="checkbox"/> Italy              <input type="checkbox"/> Japan  <input type="checkbox"/> Pakistan              <input type="checkbox"/> Poland              <input type="checkbox"/> South Korea              <input type="checkbox"/> Spain              <input type="checkbox"/> Others         </p>	

B. ACADEMIC ACHIEVEMENT							
Sem	Sem/Year	GPA	CGPA	Sem	Sem/Year	GPA	CGPA
1				2			
3				4			
5				6			
7				8			

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**C. RECOMMENDATION FROM CAMPUS INTERNATIONAL PARTNERSHIP HEAD OF SECTION/COORDINATOR**

Recommended

Not Recommended

Remark (if any) : \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_