



ACADEMIC TRANSCRIPT REQUEST FORM

INSTRUCTION: Student is required to read the **IMPORTANT GUIDELINES** carefully. Please fill up this form completely.

Full Name (CAPITAL
LETTER)

Matric No.

Programme

Email

Contact No.

Request for
(Please tick ✓)

☐

Partial Transcript

☐

Replacement of Full Transcript
(for Graduated Student Only)

Method of Collection:

(Please tick ✓)

☐

By Hand

☐

On Behalf

☐

Via Post

Name

ID/ Passport

No.

Address

Student's Signature

Date of application : ____/____/____
Date Time

STUDENT ACCOUNT DEPARTMENT

Financial Outstanding (Please tick ✓)

☐

Yes

Amount : _____

☐

No

Receipt No. : _____

Please tick (✓)		Charges (RM)
<input type="checkbox"/>	Partial Transcript	50.00
<input type="checkbox"/>	Full Transcript Replacement	50.00

Signature & Stamp

____/____/____
Date

REGISTRY AND EXAMINATION DEPARTMENT

☐

Date Received from Student ____/____/____

☐

Date of Collection (by student) ____/____/____

IMPORTANT GUIDELINES

1. Request for transcript will be charged as follows:

Partial Transcript	RM50.00	Replacement of Transcript	RM50.00
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2. Kindly complete the form and make the necessary payment at Student Account Department.

3. Completed form must be submitted together with payment receipt to One Stop Student Services Centre, Main Campus or to your respective Programme Coordinator at Regional Centre.

4. For any requests from RC's students, please allow five (5) working days for processing.

5. Transcripts can be collected:

- Main Campus: One Stop Student Services Centre on the same day or by next working day for any request received after 2.00 pm.
- Regional Centres: from your respective Programme Coordinator