Attachment 3

# STUDENT VERIFICATION FORM

**(NAME & ADDRESS SCHOOL / INSTITUTE / COLLEGE / UNIVERSITY)**

……

……

……

**(STUDENT INFORMATION)**

Name : ……

IC / Mykad No. : ……

This is to certify that the above named is currently a student at this school / institute / college / university.

- Duration of Study : …….. .( year )
- Admission :…….....……..... (month & year)
- Expected Completion : ……..... (month & year)

Thank you

**Verified by**:

Signature : ……

Name of Officer : ……

Occupation : ……

Telephone No. : ……

Date : ……

Stamping

School / Institute / College / University