

PERSONAL DETAILS

Name: _____

 Citizenship: Malaysian Others (please specify). I/C Number: _____ Gender: Male Female

Address (home): _____

Postcode: _____ Town: _____ State: _____

Phone (home): _____ Handphone: _____

Email 1: _____ Email 2: _____

EMPLOYMENT DETAILS

Company: _____

Position/Job Title: _____

Address: _____

Postcode: _____ Town: _____ State: _____

Phone (office): _____ Fax: _____

QUALIFICATION(S) DETAILS

Graduate	Course	School	Year Graduate
Diploma			
Degree			
Master			
PhD			

**Qualifications from USM only.*

I, hereby attach a money order/cheque (number: _____) / cash amounting to

RM _____ payable to PERSATUAN ALUMNI UNIVERSITI SAINS MALAYSIA.

*Fee also can be transfer to Persatuan Alumni USM CIMB Account (86-0094662-3).

-Please attach the payment receipt together with this form.

 For: Life membership registration (RM100 only)

 USM Alumni contribution

Signature: _____

Date: _____

FOR SECRETARIAT USE ONLY

Received by: _____

Date: _____

Membership Number: _____

 Membership card: Printed Posted