University College of Management Studies

Request Form (STRF 1.0)

Date: …… Student I.D. ……

Student Name: ……...Nationality:……

First Name Middle Name Last Name

Department: ……..…… Programme of Study: …….…….

Postal Address ……..... Telephone: …….

Email Address ……Level:…….……..…….

Admission Date: …… Year of Completion: …… Date of Birth: ……..…...

(**Student Service Request)**

☐ Attestation

Local ☐ Overseas ☐

☐ Certification of Certificate English Proficiency ☐

☐ Introductory Letters:

Testimonial ☐ Visa ☐ Passport ☐

Attachment ☐ Resident Permit ☐ Opening Bank Account ☐

Recipient:……

Postal Address:…….

Email:……..Tel:…….

Please indicate how you would like to receive your letter:

☐ Pick up

☐ Postal Service *(postal charges apply)*

(Please note it is the responsibility of the students to keep his/her postal/email addresses current with the university)

FOR OFFICE USE ONLY

(ACCOUNTS) STAMP

Name:

Signature:

REGISTRY

Approved by:

Signature:

Student Support Unit

Recipient: Signature: