



COURSE REGISTRATION FORM

Student's Name: HASSAN MUHAMMED

(As stated in Identity Card/Passport)

IC No./Passport/ISID: K0000000E Race: _____

Matric Card Number: T20MJ0001 Semester/Session: 2/20202021

Programme: MECHANICAL ENGINEERING

Email: hassan@gmail.com, hassan@graduate.utm.my

Please fill in the boxes clearly and correctly. Fill the code 'UM' in the status column for Repeat Course, 'HW' for the Compulsory Attendance, 'HS' for Attendance Only, 'HWUM' for the Compulsory Attendance Repeat Course.

NO.	COURSE CODE	SECTION	STATUS	CREDIT	LECTURER'S SIGNATURE
1.	IFM 1004		HW	4	
2.	IFP 1014		HW	4	
3.	IFC 1024		HW	4	
4.					
5.					
6.					
7.					
Total Credit (Exclusive of 'HS' courses)				12	

Mailing Address: XC1 227, KOLEJ DATO ONN JAAFAR, UNIVERSITI TEKNOLOGI MALAYSIA, UTM JB.

Postcode: 81310 Town or State JOHOR

I intend to register for the courses above.

Agree/Disagree

Hassan

(Student's Signature)

(Academic Advisor's or Supervisor's Signature)

Mobile Phone No: +60122354696

Name: _____

Date: 12/3/2020

Tel. Extension: _____

Date: _____

IF THE ACADEMIC ADVISOR OR SUPERVISOR DISAGREE	
Dean's/Deputy Dean's of Academic Decision	Approved/Not Approved
Signature: _____	Date: ____/____/____