



HIGH COMMISSION OF BRUNEI DARUSSALAM FINAL YEAR STUDENT CLAIM FORM

Instructions:

- 1. Complete this form and email to students@brunei.org.au ONE (1) month before departure.

| 2. Indicate with a circle or tick (✓) where appropriate. | | | | | | | | | | | |
|---|---|------------|------------------|-------------------------------|--------|--|---------------------------------|-------------------|----------------------|-------------|--|
| A. S | TUDENT DETAILS | | | | | | _ | | | | |
| Full Name (In CAPITAL) | | | | | | | BSA No. | | | | |
| Mobile No. | | | | | | | E-Mail Address | | | | |
| B. AC | CADEMIC DETAILS | | | | | | | | | | |
| Name of Institution | | | | | | | University Student ID No. | | | | |
| Program Title | | | | | | | Program Start Date (dd/mm/yyyy) | | | | |
| Course Length | | | Year(: Semesters | | | Program End Date (dd/mm/yyyy) | | | | | |
| Sponsorship Awarded By: | | | | | | Sponsorship Start Date (dd/mm/yyyy) | | | | | |
| Reference Letter No. | | | | | | Sponsorship End Date (dd/mm/yyyy) | | | | | |
| C. GRADUATION | | | | | | | (dd/iiiii/yyyy) | | | | |
| Graduation Date | | | | | | | Date Leaving for Bru | ınei | | | |
| D. CLAIMS CHECKLIST | | | | | | | (dd/mm/yyyy) | | | | |
| | | FOR STUDEN | FOR STUDENT USE | | | | | OFFICIAL USE ONLY | | | |
| No. Entitlement | | | Re | Receipt(s) Amount | | | Maximum | | Amount Date Approved | | |
| 140. | Enducinon | | | No. | Claime | d | Amount Allowed | Reim | bursed | for Payment | |
| 1 | PROJECT/DISSERTATION EXPENSES | | | | | | | | | | |
| | Receipts | | | | | | | | | | |
| | Copy of Final Year Results | | | | | | | | | | |
| | EDUCATIONAL VISIT ALLOWANXES | | | | | | | | | | |
| 2 | Report | | | | | | | | | | |
| | Claim Letter | | | | | | | | | | |
| | TRAVEL EXPENSES | | | | | | | | | | |
| | Ticket | | | | | | | | | | |
| 3 | Booking Confirmation | | | | | | | | | | |
| | Tax Invoice (If Applicable)_ | | | | | | | | | | |
| | AIR PASSAGE | | | | | | | | | | |
| 4 | Copy of Air Ticket | | | | | | | | | | |
| | Bank Statement (if paid by card) | | | | | | | | | | |
| | GRADUATION ROBE | | | | | | | | | | |
| 5 | Receipt/ Tax Invoice | | | | | | | | | | |
| | Bank Statement (if paid by card) | | | | | | | | | | |
| E. B | ANKING DETAILS | | | | | | | | | | |
| Name of Bank | | | | | | | BSB No. | | | | |
| Account Name | | | | | | Account Number | | | | | |
| F. DECLARATION | | | | | | | | | | | |
| I here | I hereby declare that the information provided is TRUE and the documents attached are mine. | | | | | | | | | | |
| Signa | Signature/ Initial Date (dd/mm/yyyy) | | | | | | | | | | |
| G. FOR INTERNAL USE ONLY | | | | | | | | | | | |
| | | | | Check By | | | Approved By | | Remarks | | |
| Recei | • | |] | | | | | | | | |
| Tax Invoice | | | ┤ | 0 | | Oimachin (1.37) | | | | | |
| | | | ┧ ├── | Signature/ initial | | Signature/ Initial | | | | | |
| | | |] <u>Full</u> | Full Name and Designation Fu | | Il Name and Designation | | | | | |
| E. BANKING DETAILS Name of Bank Account Name | | | | | | | | | | | |
| F. DE | CLARATION | | | | | | | | | | |
| | | | | | | | | | | | |
| I hereby declare that the information provided is TRUE and the documents attached are mine. | | | | | | | | | | | |
| Signa | Signature/ Initial Date (dd/mm/yyyy) | | | | | | | | | | |
| G. FOR INTERNAL USE ONLY | | | | | | | | | | | |
| Please tick if documents are submitted by studen | | | | Check By | | | Approved By | | Remarks | | |
| 1 | • | | | | | | | | | | |
| Exam Results/ Academic Records | | | ī | Signature/ Initial | | Signature/ Initial | | | | | |
| Academic Records | | | 1 | | | | | | | | |
| University Supporting Letter | | | Full | Full Name and Designation Ful | | Il Name and Designation | | | | | |