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SAP

HIGH COMMISSION OF BRUNEI DARUSSALAM
STUDENT ACADEMIC PORTFOLIO

Instructions:
1. Please circle or tick (✔) where appropriate.
2. Complete this form and email to students@brunei.org.au within ONE (1) month after start of each semester.

A. STUDENT DETAILS

Full Name (In CAPITAL)		BSNZ No.	
Mobile No.		E-Mail Address	

B. ACADEMIC DETAILS

Name of Institution		University Student ID No.	
Program Title		Program Start Date (dd/mm/yyyy)	
Course Length	Year(s) 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. CURRENT SEMESTER PROGRAM DETAILS

Academic Year (Please circle where appropriate)	1 2 3 4 5 6 R		No. of Modules	
Semester (Please state)	to		Semester Exam Dates (dd/mm/yyyy - dd/mm/yyyy)	

Module(s) taken this semester		Please tick (✔) either one only		Tick (✔) if module taken is a repeat module and when was it first taken		Tick (✔) if module taken is a replacement module. Please provide the code for the original failed module and when it was taken		
Module Code	Title of Module	Core Module	Elective Module	Repeat Module	Year & Semester	Replacement Module	Module Code	Year & Semester

D. FACULTY ACADEMIC TEAM LEADER

Full Name (In CAPITAL)		Office No.	
E-Mail Address		Mobile No.	

E. DECLARATION

I hereby declare that the information provided is TRUE and CORRECT.

Signature/ Initial: Date :   (dd/mm/yyyy)

F. FOR INTERNAL USE ONLY

Please tick if documents are submitted by student		Check By	Endorsed By	Remarks
Information Disclosure Form	☐			
Information Disclosure Form - Private	☐			
University ID Card	☐			
OSHC Policy and Membership Card	☐	Signature/ Initial	Signature/ Initial	
Program Brochure and Details	☐			
Academic Calendar	☐			
	☐			
	☐	Full Name and Designation	Full Name and Designation	