



HIGH COMMISSION OF BRUNEI DARUSSALAM STUDENT HOUSING INCENTIVE

Instructions:

- Complete this form and email to <u>students@brunei.org.au</u> before the start of new academic year.
 Please indicate with a tick (✓) where appropriate.

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 Da (dd/mm/yyyy)	te	
Reference Letter No.			Sponsorship End Dat (dd/mm/yyyy)	е	
C. ANNUAL EXAMINATION R	RESULT				
Academic Year (Please Circle)	1	2 3	4 5	6	R
Semester Module Cod		Module Title		Grade	Mark
1 2					
1 2					
1 2					
1 2					
1 2					
1 2					
1 2					
1 2					
1 2					
1 2					
D. ACADEMIC REFEREE					
Full Name (In CAPITAL)			Office No. :		
Designation			E-Mail Address :		
E. DECLARATION					
I hereby declare that the information	tion provided is TRUI	E and the documents attached are	mine.		
Signature/ Initial: Date : (dd/mm/yyyy)					
F. FOR INTERNAL USE ONLY	Y				
Please tick if documents are submitted by student		Check By	Endorsed By	Ren	narks
Academic Year Official Exam Result					
Official Academic Transcript					
Official Academic Statement		Signature/ Initial	Signature/ Initial		
University Endorsement of Academic Excellence					
University grading system if the university does not use classification system.		Full Name and Designation	Full Name and Designati	ion	