



## APEL.Q COUNSELLING FORM

### **PART A: PERSONAL PARTICULARS**

Name of Applicant	
Identity Card No./ Passport No./ National ID No.	
Contact No.	
Email Address	
Name of Programme (if any)	
Course Code & Course Name (if any)	

### **PART B: ITEM CHECKLIST**

The following activities/processes have been conducted:

No.	Action	Please Tick (√)
1	Explain the APEL.Q process, assessment, and fees involved	
2	The applicant decides to proceed with the APEL.Q application	
3	Guide the applicant on how to complete APEL.Q Application Form via MQA Portal	
4	The Counsellor provides/emails APEL.Q Fact Sheet to the applicant	
Comment:		

*(Please attach additional sheets if required)*

<p><b>Confirmation by the Counsellor:</b> I hereby confirm that the above applicant has been advised on APEL.Q processes and procedures.</p> <p>Signature:</p> <p>Name of Counsellor:</p> <p>Date:</p>	<p><b>Confirmation by the Applicant:</b> I hereby confirm that I have been advised by the named officer on the aforementioned matters and accept the processes and procedures of APEL.Q of City University.</p> <p>Signature:</p> <p>Name of Applicant:</p> <p>Date:</p>
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