



APEL.Q APPLICATION FORM

Name of applicant	
Identification card/ Passport no.	
Name of programme (Please tick [√] one)	<input type="checkbox"/> Doctor of Business Administration Program Fee RM66,800 <input type="checkbox"/> Master of Business Administration Program Fee RM38,800
Programme level (MQF Level) (Please tick [√] one)	<input type="checkbox"/> Doctorate <input type="checkbox"/> Master's Degree
Total credits of the programme	
Confirmation of APEL.Q Advisor	<p>I hereby confirm that the above applicant has undertaken the Self-Assessment exercise and deemed eligible to apply for APEL.Q assessment.</p> <p style="text-align: right;">_____</p> <p style="text-align: right;">(Signature)</p> <p>Name of Advisor:</p> <p>Date:</p>
Payment transfer to CIMB Bank account. Account Name: U.C.I Education Sdn. Bhd. Account No: 800 229 5164 Please email payment slip to: cac@city.edu.my and credit.control@city.edu.my Provide your full name, contact no., and NRIC/ Passport No. in the email.	

I hereby:

- a. declare that I have read, understood, and accepted all the terms and conditions stipulated under the provision of APEL.Q of my institution and
- b. declare that all the information/ documents provided to support this application are authentic, true, and accurate.

I fully understand that the City Univ reserves the right to reject my application if proven otherwise.

Signature	:	
Name	:	
Date	:	
For Office Use Only		
Acknowledgement by:		
Date:		
Program Fee: Online/ Banker's Cheque/ Draft No:.....		