

EPF WITHDRAWAL FORM



Student Details
Name of Student:
NRIC: Telephone:
Programme:
Semester:
Matric No.:
Total:
☐ CMI Fee ☐ 1 year fee ☐ 1 semester fee ☐ Administration fee
Address to post the documents if required:
I hereby REQUEST for the Universiti Malaya-Wales (IUMW) to issue a Student Registration Confirmation Letter of EPF withdrawals for the payment of prescribed tuition fees.
Student Signature
Date:
For Office Hos
For Office Use Verified
Vermed
Officer Signature and Position
Date: