



IMPORTANT: PLEASE SEE NOTE OVERLEAF.

FOR TREASURY SECTION USE ONLY

Fees Outstanding Yes* \$ _____ Received \$ _____
 No Signed by: _____

Name: _____

Student No.: □-□□-□□□□-□

Academic Unit: FAH FBA FED FHS FLL FSS FST

Contact No.: _____

E-mail: _____

No. of copies applied: _____

Language Preference:

Additional Information:

Chinese Portuguese English

Expected Date of Completion

Purpose: _____

❖ I declare that the information provided in this application form is correct and I have acknowledged and understood the following <Personal Data Collection Statement of the Registry of the University of Macau> stated below:

The University of Macau, in accord to the purpose of providing the related administrative services requested by applicants, requires applicants to fill in this application form and submit to the Registry. The personal data collected in the form will only be used for the mentioned purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures. The transmission of personal information over the Internet may lack protection and security. There is a risk that your information may be accessed or used by an unauthorized third party.

The application will not be proceeded if applicants fail to fill in any of the mandatory fields as required in the application form in accord to the personal-identification and education-related information.

To make correction of your personal data held by the University or to apply for related testimonials, undergraduate students can submit the request to the Registry while postgraduate students should contact the Graduate School.

Applicant's Signature: _____ Date: _____

✂=====

FOR OFFICE USE ONLY	Registry Stamp	Treasury Signature & Stamp
COMPLETED BY TREASURY SECTION		

RECEIPT

Payment of MOP/HK\$ _____ for _____ copy/copies of testimonial from Mr./Ms. _____,
student no.: _____ received.

Date: _____ / _____ / _____

Note: ❖ Please bring along with you this receipt for collection after 2 working days. All testimonials will only be kept in file for a month from the date of issue. The Registry will not issue any overdue testimonials.
❖ Please find the "Authorization Letter" on the overleaf if applicable.

✂=====

FOR TREASURY SECTION USE ONLY

Payment of MOP/HK\$ _____ for _____ copy/copies of testimonial from Mr. /Ms. _____,
student no.: _____ received.

Date: _____ / _____ / _____ Signature & Stamp of Treasury Section: _____

** Place of Issuing Bank	Currency / Cheque	Bank Charges
Macao	Hong Kong Dollar	-----
Macao or Outside Macao	Foreign Currency	MOP50

NOTE

1. Students must allow 2 working days of processing time (from the date of application) for a testimonial to be issued.
2. MOP/HK\$55 is charged for the first copy of the testimonial. MOP/HK\$ 50 is charged for extra copy.
3. Application for testimonial will not be processed for students who have outstanding fees/charges in their accounts with the University or students who left the University without completing the check-out procedures.
4. Additional bank charges are required for foreign cheque Payments. **
5. If you want to settle the application fee by credit card payment, please complete the "Authorization of Credit Card Payment" form (REG/Form/036), which can be downloaded from the Registry webpage: <http://reg.umac.mo>.

Place of Issuing Bank	Currency / Cheque	Bank Charges
Macao	Hong Kong Dollar	-----

AUTHORIZATION LETTER

I (Name) _____ (I.D. No. _____) hereby authorize
 (Name) _____ (I.D. No. _____) to act on my
 behalf to collect my testimonial(s).

I declare that the information provided in this authorization letter is correct and I have acknowledged and understood the <Personal Data Collection Statement of the Registry of the University of Macau>.

Signature: _____ Date: _____

Note: Please submit the Authorization Letter together with I.D. copies of both parties.