

Confirmation of Full Time

Student Status

Name of Parent: _____

Policy No.: _____

I, _____ (I/C no: _____), son / daughter of
_____ hereby confirm that I am registered as a full time student with:

a. Name of Institution and Address

Kindly affix stamp of institution named above.

b. Course Undertaken

c. Description of Course

d. Duration of Course

From: _____ To: _____

e. My Student Registration no: _____

Date: _____

Signature of Student