



ALUMNI LIBRARY MEMBERSHIP APPLICATION FORM

HOW TO APPLY

Please complete the application form and return it together with one passport-size photograph and your payment* to:

**Circulation Services Librarian
Main Library, Wawasan Open University
54 Jalan Sultan Ahmad Shah, 10050 Penang, Malaysia
Tel: 604-2180 159 Fax: 604-227 9214 Email: library@wou.edu.my**

INDIVIDUAL APPLICANT INFORMATION *[Please type or print clearly]*

Name of Applicant (* Prof/Dr/Mr/Mrs/Ms)
Organization/Company
Designation Nationality
Office Address
Telephone (Off) (Home) Handphone
Email
Home Address
NRIC/Passport No
Course Studied
Campus
Year Qualification Awarded..... YYYY

MEMBERSHIP FEE *[Please tick where appropriate]- Membership fees below are subject to 6% GST charge.*

- New application RM 300.00 (refundable deposit of RM250.00 and a one time registration fee of RM50.00)
- Renewal of membership RM 20.00



DECLARATION BY APPLICANT

I declare that the information given by me is correct and that I will abide by the library rules if my application is approved.

.....
Applicant's Signature

.....
Date

*** PAYMENT** *[Please tick where appropriate]*

- I hereby enclose a cheque in the amount of RM Cheque No
Cheque should be crossed and made payable to **WAWASAN OPEN UNIVERSITY SDN BHD**
- I hereby enclose cash in the amount of RM
- Interbank transfer

Payee Name : WAWASAN OPEN UNIVERSITY SDN BHD
CIMB Account No. : 0742-000-2369-050

I hereby enclose receipt in the amount of RM.....

FOR LIBRARY USE ONLY	
Date received	
Membership <input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected
Alumni Membership No	
Cheque No	Receipt No