



DEAR APPLICANT,

1. Application for accommodation can **ONLY** be made after an applicant has paid the Tuition Fee.
2. Completed Form can be submitted via sshub_hostel@imu.edu.my
3. IMU reserves the right **NOT** to process any late submission and/or incomplete application forms.
4. All choices here are preferences, there are **NO GUARANTEES** and rooms are allocated based on **FIRST COME FIRST SERVE BASIS, SUBJECT TO ROOM AVAILABILITY**
5. Accommodation **DEPOSIT RM900 PER STUDENT**

PLEASE FILL ALL THE REQUIRED INFORMATION.

Name as in IC/Passport: _____

Student ID Number: _____

Email Address: _____

Student Mobile Number: _____

Programme Applied: _____

Intake Month/Semester: _____

Name of Parent/Guardian: _____

Parent Contact Number: _____

PLEASE TICK ONE.

Medical Condition: I have sickness that needs medical assistance.

I do not suffer from any sickness.

Financial Status : Self Sponsored

Other Sponsorship (Please Specify) _____

Gender: Male

Female

PLEASE INDICATE 1 TO 3 YOUR PREFERRED RESIDENTIAL UNIT

	STANDARD (5 students per unit)					
ROOM TYPE	TSR 1 (AB)		TSR 2 (SB)		SR 3 (SB)	
FIS	RM2,436		RM2,200		RM3,432	
OTHER PROG	RM3,652		RM3,300		RM5,148	

	SUPERIOR (3 to 4 students per unit)					
ROOM TYPE	SR 1 (AB)		SR 2 (SB)		SR 3 (SB)	
EXCLUDING FIS	RM7,920		RM7,260		RM5,720	

	DELUXE (3 students per unit)					
ROOM TYPE	SR 1 (AB)		SR 2 (SB)		SR 3 (SB)	
EXCLUDING FIS	RM11,880		RM9,900		RM7,920	

DESCRIPTION:			
TSR	Twin Sharing Room	SR	Single Room
AB	Attached Bathroom	SB	Shared Bathroom



CONFIRMATION AND DECLARATION.

I, _____, here by:

1. Confirm my understanding that all choices here are preferences, there are **NO GUARANTEES** and rooms are allocated based on **FIRST COME FIRST SERVE BASIS**
2. Confirm that this residential application is **SUBJECT TO ROOM AVAILABILITY** and IMU reserves the right to assign me to any other type of residential unit available.
3. Agree to make the **FULL PAYMENT OF THE RENTAL (FOR THE FULL SEMESTER) WITHIN 2 WEEKS** from the time I receive confirmation email/notification on my room reservation from IMU. Failing which my booking would be cancelled.
4. Confirm that I have **READ & ACCEPT ALL TERMS STATED IN THE RULES & REGULATIONS, AND AGREE TO ABIDE** by the said Rules and Regulations.
5. Agree that my residential period is only for **ONE (1) SEMESTER** and should I wish to continue my period of stay for next semester, I need to reapply and it is IMU's decision to approve my application **BASED ON ROOM AVAILABILITY AND MY RECORDS**
6. Agree that **NO REFUND** will be given should I vacate the room before or during the semester.
7. Fully understand that if I **VIOLATE ANY OF THE SAID REGULATIONS, I WILL BE PENALISED AND/OR EXPELLED** from the Residential Unit.
8. Understand that in the event of my expulsion, **MY RENTAL FOR THE UNEXPIRED RESIDENTIAL PERIOD WILL BE FORFEITED**
9. Agree that IMU reserves the right to charge outstanding amounts which includes underpayment of rent, cleaning charges, damages, unpaid fines, underpayment of electricity and etc to the my student account.
10. Agree that in the event of a refund being due, the obligation is on me to provide all the relevant information, such as bank information or where cheques are issued, the current address, in order that the refund may be completed. Failure to provide correct information may result in the delay, or additional charges being applied.
11. Declare that all information given by me is complete, accurate and true. Any information given falsely or withheld will affect my application and/or agreement.

Signature of Applicants/Student

Date

FOR RESIDENTIAL EXECUTIVE (OFFICE USE ONLY)

Assigned Room No.:	Confirmed by:	Date:	
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FOR FINANCE DEPARTMENT (OFFICE USE ONLY)

Receipt No.	Received by:	Date:	
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