**SECTION B. INTERNATIONAL STUDENT PLACEMENT ENQUIRY FORM**

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| --- | --- | --- |
| 1. | Full Name as in Passport |  |
| 2. | Nationality |  | Gender |  |
| 3. | Passport No |  |
| 4. | Passport expiry date |  |
| 5. | If Malaysian, please provide IC no. |  |
| 6. | Name of University |  |
| 7. | University’s Address |  |
| 8. | University’s Website |  |
| 9. | Name of Programme |  |
| 10. | Current Year of Studies |  |
| 11. | **Most recent clinical experiences in your current university (please complete below)** |
| Rotation/Dept.  | Dates (from dd/mm/yy till dd/mm/yy)  | Duration (no. of weeks) |
| 11a. |  |  |  |
| 11b. |  |  |  |
| 11c. |  |  |  |
| 12. | **Electives placement preferred at RUMC. Min. of 3 weeks & not more than 6 weeks. Please provide all 3 choices as follows:** |
| Rotation/Dept.  | Dates (from dd/mm/yy till dd/mm/yy)  | Duration (no. of weeks) |
| 12a. |  |  |  |
| 12b. |  |  |  |
| 12c. |  |  |  |