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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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. |  |  |  | | |