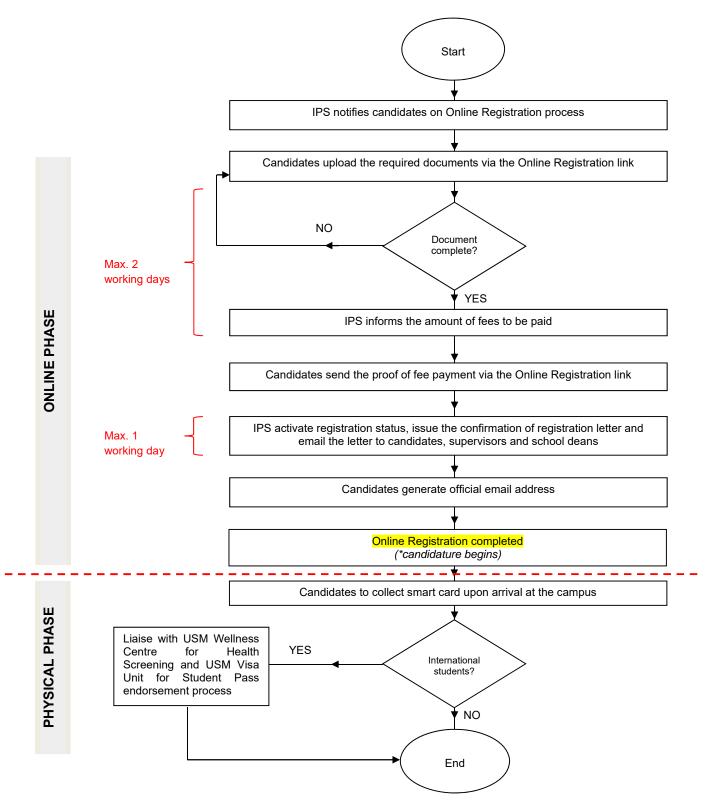


REGISTRATION GUIDELINES FOR NEW POSTGRADUATE INTERNATIONAL STUDENTS

- 1. Steps for Registration Research Mode Students
- 2. Checklist for Registration
- 3. Medical Examination Report
- 4. Health Declaration Form
- 5. Confirmation of Registration Form (Part A-D)
- 6. Student Pledge Form
- 7. Change of Address Form
- 8. Smart Card Collection Form
- 9. Important Contact Details



STEPS FOR REGISTRATION - RESEARCH MODE STUDENTS



*Student can start his/her research by communicating with the supervisor(s) and utilise USM online facilities as registered postgraduate students.

IMPORTANT:

Students are required to complete the whole process above. Failure to do so will lead to registration termination without prior notice.



INSTITUT PENGAJIAN SISWAZAH UNIVERSITI SAINS MALAYSIA INSTITUTE OF POSTGRADUATE STUDIES

RESEARCH MODE PROGRAMMES REGISTRATION DATE

	March Intake						
Candi	Candidate who register between the below listed date is going to pay:						
	16/3 - 15/4	Full one semester tuition fee					
	16/4 - 15/5	(less) one month tuition fee					
	16/5 – 15/6	(less) two months tuition fee					
	16/6 – 15/7	(less) three months tuition fee					
	16/7 – 15/8	(less) four months tuition fee					
	16/8 - 15/9	(less) five months tuition fee					
	October Intake						
Candi	idate who register between the below list	ed date is going to pay:					
	16/9 - 15/10	Full one semester tuition fee					
	16/10 - 15/11	(less) one month tuition fee					
	16/11 - 15/12	(less) two months tuition fee					
	16/12 - 15/1	(less) three months tuition fee					
	16/1 – 15/2 (less) four months tuition fee						
	16/2 - 15/3	(less) five months tuition fee					

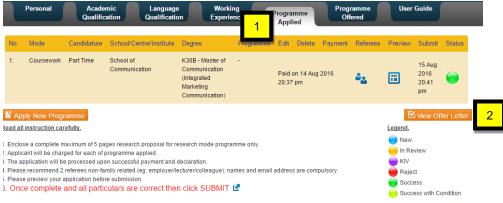
STEPS FOR REGISTRATION - RESEARCH MODE STUDENTS

Step 1 (A): Visa Application

For all international students, please proceed for Visa Application. Refer to the Seven Steps to Get A Student Visa. Do not travel to Malaysia prior to approval of your Student Visa. You are required to physically be in campus after Malaysian government allowing all international students to obtain the Visa Approval Letter. Temporarily, only EMGS Approval Letter will be issued to all for the purpose of online registration into any universities in Malaysia.

Step 1 (B): Accepting Offer

You need to log in into Online Application portal (http://onlineips.usm.my/admission/). Refer to the below image.





1. Coursework Full Time School of Medical Sciences S114 - Master of Pathology (Medical Microbiology) - 📆 💿	No.	Mode	Candidature	School/Centre/Institute	Degree	Programme	Offer Letter	Choices	
⊠ submit 4	1.	Coursework	Full Time	School of Medical Sciences	S114 - Master of Pathology (Medical Microbiology)	-	1	0	3
							C	Submit	4

Step 2: Online Registration

All students are required to upload all the required document through the online form https://form.jotform.com/ipsusm/onlineregistrationips2. Please refer to the checklist of required documents to be presented during this process. Refer to *Registration Steps and Forms* document.

Step 3: Payment of Fees

Upon the verification of all the documents, you will be informed regarding the fee amount that has to be paid. You are required to upload the receipt of payment in the online form and notify us through the person in-charge who had communicated with you via e-mail.

Step 4: Student Activation Status

Your status of candidature will be activated and you will be notified through email once. You will be provided with the following documents:

- i. Confirmation of Registration Letter
- ii. Pin No. for Self Enrolment (Student Email Registration)
- iii. Softcopy of Postgraduate Student Handbook

Step 5: Self Enrolment (Student Email Registration)

You are allowed to generate your own email by using your preferred email address. Use the pin number to activate your account at the Self Enrolment page (<u>https://self.usm.my/</u>).



Note: After generating the email address, it can be used to log in to Campus Online portal, access to online library and other online facilities for students.

ON- CAMPUS PROCESS

Step 6: Collection of Student Card

You are required to come to IPS Office to collect your student card.

Step 7: Endorsement of Medical Report and Student Pass

For international student, you are required to get your medical report endorsed by USM Wellness Center and your Student Pass endorsed by USM Visa Unit.

Step 8: Activation of Student Card

You are advised to visit the library to activate your Student Card for the use of physical library facilities such as to borrow books.

-----000000000000------



Name:			
Passport no.:			

SECTION A

Checklist for documents that need to be **submitted** for online registration.

1.	Copy of Offer Letter / Extension of Offer Letter	
2.	Health Declaration Form / Medical Examination Report	
3.	Confirmation of Registration Form (Part A – D)	
4.	Student Pledge Form	
5.	Change of Address Form (if necessary)	
6.	Scholarship / sponsorship letter of offer (if any) / Payment receipt	
7.	Visa Approval Letter (VAL) / EMGS Approval Letter	
8.	Smart Card Collection Form	



Affix passport size photo here

PLEASE USE CAPITAL LETTERS SECTION 1 (TO BE COMPLETED BY CANDIDATE)

(PART A)

FULL NAME	E (AS	3 IN	PA	SS	PO	RT)														
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SECTION 1

(PART B) - Please tick (\surd) in the relevant box

Declaration of self and family illness. Explain in full if you or your family has any of the following illness. • Immediate family refers to father, mother, brothers / sisters

MEDICAL PROBLEMS		SELF		DIATE	If "Yes" please state
	Yes	No	Yes	No	
1. Congenital or inherited disorder					
2. Allergy					
3. Mental illness					
3. Fits, stroke, other neurological disease					
5. Diabetes Mellitus					
6. Hypertension					
7. Heart or vascular disease					
8. Asthma					
9. Thyroid disease					
10. Kidney disease					
11. Cancer					
12. Tuberculosis					
13. Drug addiction					
14. AIDS, HIV					
15. History of surgery					
16. Other illness					

Current medication (Long term)

IMMUNISATION HISTORY (where applicable)	DATE IMMUNISED					
1. Yellow Fever*						
2. BCG*						
3. Meningitis (Quadrivalent)*						
4. Hepatities B*						
5. Others						

I hereby certify that the information given above is true. I understand that my registration will be rejected if there is any false information given.

SECTION 2 - PHYSICAL EXAMINATION

To be filled by examining doctor

1. BASIC MEASUREMENT		
HEIGHT :	m	BLOOD PRESURE :mmHg
WEIGHT :	kg	PULSE RATE : / min
VISION TEST : Unaided : (R)(L)		COLOUR VISION TEST:
Aided : (R)(L)		NORMAL / ABNORMAL

2. GENERAL EXAMINATION									
ITEM	YES	NO	COMMENT						
a. DEFORMITIES									
b. PALLOR									
c. CYANOSIS									
d. JAUNDICE									
e. OEDEMA									
f. SKIN DISEASES									

3. SYSTEM EXAMINATION										
ITEM	NORMAL	ABNORMAL	COMMENT							
a. EYES (Including fundus copy)										
b. EARS										
c. NOSE										
d. ORAL CAVITY / THROAT										
e. NECK										
f. HEART										
g. LUNGS										
h. ABDOMEN / HERNIAL ORIFICES										
j. MENTAL CONDITION										
k. MUSCULOSKELETAL SYSTEM										

SECTION 3 - INVESTIGATIONS

To be filled by examining doctor

1. URINE TEST								
ITEM	DATE TAKEN	RESULT						
a. ALBUMIN								
b. SUGAR								
c. MICROSCOPIC								
d. MORPHINE								
e. CANNABIS								
f. AMPHETAMINES TYPE STIMULANT								

* International candidates are required to conduct all the above tests.

2. BLOOD TEST (Please attach all the original lab report)								
ITEM	DATE TAKEN	RESULT						
a. HEPATITIS Bs ANTIGEN								
b. HEPATITIS C								
c. HIV								
d. VDRL / TPHA								
e. MALARIAL PARASITE								

* International candidates are required to conduct all the above tests.

3. CHEST X-RAY INFORM	MATION	
CHEST X-RAY NO.		
DATE TAKEN		
PLACE TAKEN		
REPORT		

SECTION 4 - CERTIFICATION BY THE EXAMINING DOCTOR

Please tick $(\sqrt{1})$ in the appropriate box

I certify that I ha	ave on this date	examined
Mr. / Ms		
Passport No.	and found him / her	: -
	IN GOOD HEALTH	
	HAVING THE FOLLOWING MEDICAL COMPLICATION(S) (P	lease State)
	UNDERGOING TREATMENT FOR: (Please State)	
Date	Signature of Doctor	
	Name of Doctor	
	Qualification	
	Hospital / Clinic	
	Registration	
	Number	
	Official Stamp	

Remarks by University / College Official



HEALTH DECLARATION FORM

I hereby declare that I am free from the following diseases/conditions:

175140	SE	LF	IF NO, PLEASE	
ITEMS	YES	NO	STATE	
Tuberculosis				IF YOU HAVE SOUGHT
Hepatitis B				- CONSULTATION FOR - ANY OF THE LISTED
Hepatitis C				DISEASES/CONDITION,
HIV				YOU ARE REQUIRED TO
Drug use/abuse of:		1		SUBMIT YOUR
1. Opiates				MEDICAL
2. Cannabinoids 3. Amphetamine				HISTORY/REPORT
4. Methamphetamine				FROM YOUR TREATING
				PHYSICIAN TO
Sexually Transmitted Diseases				CENTRE.
Congenital or Inherited Disorder				
Cancer				
Epilepsy				
Psychiatric Illness				
Other illness				

I declare that I will submit myself for compulsory Post-Arrival Health Examination as per Malaysian regulations. In the event that I should be diagnosed with any condition that deems me **UNSUITABLE** for studies, I will bear the cost of leaving Malaysia and will adhere to the immigration requirements on the visit pass and exit before the pass expiration, or any deadline given to me whichever is earlier.

I declare that in the event I should be diagnosed with any conditions that does not require my removal from Malaysia but requires medical treatment and I choose to remain in Malaysia to continue my studies, I will bear any and all costs relating directly or indirectly towards the medical management of my medical condition.

I confirm that EMGS Panel Clinic/University Health Centre shall not be responsible in any manner or whatsoever, arising out of EMGS Panel Clinic/University Health Centre certification of my medical status as suitable to study or reside in Malaysia despite the medical condition described above. I further undertake to hold EMGS Panel Clinic/University Health Centre harmless from any loss or liability arising from this decision and agree to indemnify and keep EMGS Panel Clinic/University Health Centre from any loss or liability arising from this decision.

Date (dd/mm/yyyy)	Name of applicant as indicated in the passport
Applicant's signature	Applicant's passport number



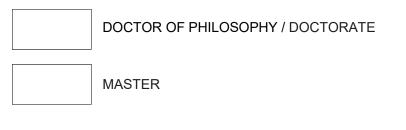
CONFIRMATION OF REGISTRATION FORM (PART A – D)

FULL NAME (AS IN PASSPORT):

PASSPORT NO .:

SCHOOL / CENTRE / INSTITUTE:

A. DEGREE TYPE



B. CANDIDATURE TYPE



C. STUDENT DECLARATION

 I agree that the copyright to a thesis belongs to the student. However, as a condition of being awarded the degree, I hereby grants to the University, a free, ongoing, non-exclusive right to use the relevant work and/or thesis for the University's teaching, research and promotional purposes as well as free and the non-exclusive right to retain, re-produce, display and distribute a limited number of copies of the thesis, together with the right to require its publication for further research and archival use.

 Date
 Signature of Candidate

D. GRADUATION REQUIREMENT FOR RESEARCH MODE PROGRAMME

Please be informed that all postgraduate research mode students are compulsory to fulfil the following publication requirements for graduation. These requirements applied for registered students starting from Semester 1, Academic Session, 2017/2018 and onwards:

CLUSTER	MASTER	DOCTOR OF PHILOSOPHY								
Sciences/ Engineering/ Health & Medical	At least one (1) article journal, accepted or published in journals / proceedings indexed by ISI / SCOPUS	At least two (2) article journal, accepted or published in journals indexed by ISI / SCOPUS								
Arts	 At least one (1) article journal, accepted or published in any categories listed below: i. Journals/proceedings indexed by ISI / SCOPUS / ERA ii. Journals by the University or listed in myJurnal (Malaysian Journal Management System) from MyCite (Malaysian Citation Centre) iii. Book chapters published by publishers listed in the Thomson Reuters Web of Science (WoS) Master Book List or Penerbit USM or MAPIM 	At least one (1) article journal, accepted or published in journals indexed by ISI / SCOPUS / ERA or At least two (2) articles, accepted or published in any categories listed below: - i. Journals by the University or listed in myJurnal (Malaysian Journal Management System) from MyCite (Malaysian Citation Centre) ii. Book chapters published by publishers listed in the Thomson Reuters Web of Science (WoS) Master Book List or Penerbit USM or MAPIM								
Authorship	Publications accepted must be published with the supervisor(s). The candidate must be the first student author. Only the first student author is allowed to use this article to fulfil his/her graduation requirement.									
Plagiarism	Plagiarized article will not be accepted for grad	duation requirement.								
Topic of publications	Publications accepted must be related to his/h	er thesis/dissertation in his/her thesis.								
Affiliation	Publications accepted must carry USM affiliation	on.								
Blacklisted journals	 Publications in the following journals are NOT accepted: List of blacklisted journal publishers by Ministry of Higher Education, Malaysia <u>https://referencephsusm.files.wordpress.com/2013/06/four-4-publishers-not-recognized by-malaysia-ministry-of-education.pdf</u> Beall's List of Predatory Publishers <u>https://predatoryjournals.com/publishers/</u> Beall's List of Predatory Journals <u>https://predatoryjournals.com/journals/</u> 									

Date

Signature of Candidate

(For IPS Office Use Only)

Registration date:	IPS Staff confirmation :



STUDENT'S PLEDGE FORM

I HEREBY SOLEMNLY AND SINCERELY DECLARE THAT I ACCEPT THE STATUS AS A REGISTERED STUDENT OF **UNIVERSITI SAINS MALAYSIA**, AND I AGREE TO ABIDE BY THE STUDENTS DISCIPLINARY RULES AND ALL THE UNIVERSITY REGULATIONS, AND ORDERS AS DETERMINED AND ENFORCED BY THE UNIVERSITY AUTHORITY FROM TIME TO TIME.

I PLEDGE TO ABIDE BY THE PRINCIPLES OF THE UNIVERSITY CONSTITUTION, AND REGULATIONS THERETO TO ENSURE PEACE AND HARMONY IN THIS CAMPUS.

I ALSO PLEDGE TO STRIVE FOR EXCELLENCE IN MY FIELD, AND TO APPLY KNOWLEDGE AS A KEY TOWARDS ACHIEVING SUCCESS AND SUSTAINABILITY FOR TOMORROW.

I UNDERTAKE TO UPHOLD THE HONOUR AND REPUTATION OF UNIVERSITI SAINS MALAYSIA.

 FULL NAME
 :

 AS IN PASSPORT/ IDENTITY CARD (USE CAPITAL LETTER)

 PASSPORT/ IDENTITY CARD NO.:

 SCHOOL/CENTRE/INSTITUTE

 PROGRAMME OF STUDY

 DATE OF REGISTRATION

 SIGNATURE



INSTITUT PENGAJIAN SISWAZAH UNIVERSITI SAINS MALAYSIA INSTITUTE OF POSTGRADUATE STUDIES

CHANGE OF ADDRESS FORM

1. FULL NAME (AS IN PASSPORT):

2. PASSPORT NO .:

3. CORRESPONDENCE ADDRESS:

STATE	ATE:										COUNTRY:												
POST]	TE	LEI	РНС			D.:						
4. PEF		NEN		DF	RES	SS:																	
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		C	Date													Sigi	natu	ire c	of Ca	andi	date	Э	

Use Only)
IPS Staff confirmation:



INSTITUT PENGAJIAN SISWAZAH INSTITUTE OF POSTGRADUATE STUDIES

SMART CARD COLLECTION FORM

FULL NAME:

IDENTITY CARD / PASSPORT NO.:

MATRIC NO .:

SCHOOL / CENTRE / INSTITUTE:

Signature: _____ Date: _____

oto	•	
ale	•	

Representative Name (if applicable):

(For IPS Office Use Only)

Date of Card Collection:	IPS Staff confirmation :



IMPORTANT CONTACT DETAILS

UNIT	CONTACT NO.	E-MAIL
ADMISSION	Main Campus	
(Registration matters)	+604 – 653 6309	admission_ips@usm.my
(Postponement of registration date)	+604 - 653 2958	nuryaakop@usm.my
	+604 - 653 2958	ayunizulikha@usm.my
	+604 - 653 6027	angelolive@usm.my
	+604 - 653 2946	snfa@usm.my
	+604 - 653 2946	siti hajar@usm.my
	+604 - 653 2951	syazira@usm.my
	+604 - 653 2937	farah_man@usm.my
	1004 - 000 2007	laran_man@usin.my
	Engineering Campus	
	+604 - 599 5075	siti.norlaila.ahmad@usm.my
	+604 - 599 6525	khairunisa@usm.my
	+004 - 399 0323	Khaliullisa@usili.lliy
	Health Campus	
	+609 – 767 2383	ridhuan@usm.my
	+609 – 767 2384	haznida@usm.my
BURSARY	1003 - 101 2304	nazinda@usin.my
(Fees related matters)	+604 – 653 3777	norhayaty@usm.my
(Tees related matters)	+004 - 000 0777	nursalmi@usm.my
		ukpbendahari@usm.my
FELLOWSHIP		
(Financial Assistance)	+604 - 653 2982	noorzamreena@usm.my
	+604 - 653 2983	shalina@usm.my
VISA	Main / Engineering	
(Student Pass matters)	Campus	visa@usm.my
	+604 – 653 2493	msidek@usm.my
	+604 – 653 2777	fadzilla@usm.my
	Health Campus	
	+609 – 767 2033	sulbahri@usm.my
ACCOMMODATION	Main Campus	
	+604 - 653 4050	asmahani@usm.my
	+604 – 653 3192	bfpphostel@gmail.com
	Health Campus	norashiken@usm.my
	+609 – 767 1316	nliyana@usm.my
	+609 – 767 1302	
	+609 – 767 1346	
	Engineering Compus	
	Engineering Campus +604 – 599 5514	nhouazana@uam mu
	+604 - 599 5504	pbsyazana@usm.my dlfahrul@usm.my
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INSTITUT PENGAJIAN SISWAZAH INSTITUTE OF POSTGRADUATE STUDIES

SCHOOL/CENTRE/INSTITUTE PERSONNEL

MAIN CAMPUS		
School of Housing, Building and Planning	+604–653 6193	iftitah@usm.my
School of Industrial Technology	+604–653 2218	rasslene@usm.my
Graduate School of Business (GSB)	+604–653 2795	mariyam@usm.my
School of Biological Sciences	+604–653 4035	ezliza@usm.my
School of Chemical Sciences	+604–653 3540	subrag@usm.my
School of Communication	+604–653 3600	nur_akmar@usm.my
School of Computer Sciences	+604–653 3263	zuhaida@usm.my
School of Distance Education	+604–653 2302	nazira_za@usm.my
School of Educational Studies	+604–653 2049	jayajohan@usm.my
School of Humanities	+604–653 3850	bazilah@usm.my
School of Languages, Literacies and Translation	+604–653 4543	bfaridah@usm.my
School of Management	+604–653 3367	mnnooraida@usm.my
School of Mathematical Sciences	+604–653 2629	wafi@usm.my
School of Pharmaceutical Sciences	+604–653 4593	faizbadiozaman@usm.my
School of Physics	+604–653 3025	edzuwyn@usm.my
School of Social Sciences	+604–653 3362	farhanahah@usm.my
School of the Arts	+604–653 3620	hidayahrahman@usm.my
Analytical Biochemistry Research Centre (ABrC)	+604-653 4696	amiraazman@usm.my
Centre for Chemical Biology	+604-653 5513	zulkiflimdy@usm.my
Centre for Drug Research	+604-653 3274	nurulamira_ali@usm.my
Centre for Global Archaeological Research	+604-653 4148	azmandarus@usm.my
Centre for Global Sustainability Studies	+604-653 2461	zurina@usm.my
Centre for Instructional Technology and Multimedia	+604-653 3225	azzah@usm.my
Centre for Islamic Development Management Studies	+604-653 4601	ahmad_shaharil@usm.my
Centre for Marine and Coastal Studies	+604-653 2604	alif_rashidi@usm.my
Centre for Policy Research and International Studies	+604-653 3385	zuraida@usm.my
Collaborative Microelectronic Design Excellence Centre (CEDEC)	+604-653 5628	nuha@usm.my
Institute of Nano Optoelectronics Research and Technology (INOR)	+604-653 5640	wanrosdan@usm.my
Institute for Research in Molecular Medicine	+604-653 4808	redzuan@usm.my
National Advanced IPv6 Centre	+604-653 3001	malar@usm.my
National Higher Education Research Institute	+604-653 5754	tnsalman@usm.my
National Poison Centre	+604-653 2078	sivagamy@usm.my
Women's Development Research Centre	+604-653 3433	hasniza@usm.my



INSTITUT PENGAJIAN SISWAZAH INSTITUTE OF POSTGRADUATE STUDIES

ENGINEERING CAMPUS		
River Engineering & Urban Drainage Research Centre	+604-599 5464	dunorzaide@usm.my
School of Aerospace Engineering	+604-599 5967	sitihajarms@usm.my
School of Chemical Engineering	+604-599 5880	kamil.ashar@usm.my
School of Civil Engineering	+604-599 6209	liliqzaharah@usm.my
School of Electrical and Electronic Engineering	+604-599 6011	normala@usm.my
School of Materials and Mineral Resources Engineering	+604-599 5003	mdkamal@usm.my
School of Mechanical Engineering	+604-599 6305	cerasyidah@usm.my

HEALTH & BERTAM CAMPUS		
Advanced Medical & Dental Institute	+604-562 2352	yusmadi@usm.my
School of Dental Sciences	+609-767 5522	shmastura@usm.my
School of Health Sciences	+604-767 7522	ithma@usm.my
School of Medical Sciences	+604-767 6052	wnfajrina@usm.my

Version: January 2021

Institute of Postgraduate Studies

Universiti Sains Malaysia 11800 USM Penang, MALAYSIA. Email : admission_ips@usm.my

www.admissions.usm.my