

Universiti Malaysia Perlis UniMAP
Centre for Industrial and Governmental Collaboration (CIGC)

InTra VERIFICATION FORM

Section 1 – To be completed by student School of _____

Student Name:		Matric No :	
Programme:			
Host Company:			
Address:			

Section 2 – To be completed by Host Company

This is to confirm that _____
(Student Name)

Has registered for training starting on: _____
(Date Registration)

at _____

(Host Company Name & Address)

Name :

Position :

Phone Number :

Email :

Fax :

Signature/Stamp:

****Student should return this form within one week after reporting for duty at the Host Company**

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