



PERTUBUHAN KESELAMATAN SOSIAL
KEMENTERIAN SUMBER MANUSIA
Menara PERKESO
281, Jalan Ampang
50538 Kuala Lumpur

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Laman Sesawang : www.perkeso.gov.my

LAMPIRAN A

DECLARATION OF STUDY AT INSTITUTIONS OF HIGHER EDUCATION

A. STUDENT DETAILS

Student's Name : Contact No.:.....
No. KPPN : Email :.....

This is to certify that the above named is a student at IPT: -

Course/Programme:

Level of Studies : ☐ Diploma ☐ Degree ☐ Others :

Type of Course : ☐ Full Time ☐ Part Time

Date of Entry : Day Month Year

Duration of Studies : Year Month

Current Semester : 1 / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10 (Please circle)

Current Semester Result : (GPA / CGPA / Other)

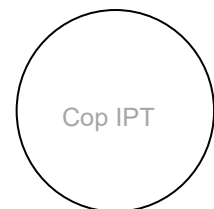
(please attach a copy of offer letter / the latest examination result)

Expected Date of Completion Day Month Year
(Pass/ Delay/ Quit/ Fail)

B. DECLARATION BY INSTITUTIONS OF HIGHER EDUCATION (IPT)

I hereby declare that the above information is correct, and I understand that PERKESO has the right to reject and cancel this declaration if it is found to be incorrect.

Signature IPT :
Full Name :
Designation :
Contact No :
Date :



C. TO BE COMPLETED BY STUDENTS

Name of Deceased :

No. KPPN of Deceased :

No. KPPN of Beneficiary :

Please delete whichever not applicable.

D. FOR PERKESO USE ONLY