



ALBUKHARY INTERNATIONAL UNIVERSITY

## ADVISEE'S PROFILE

Full name as in I.C. / Passport: .....

Student ID: .....

School/Centre: .....

Programme: .....

Date of admission: .....

I.C. / Passport No: .....

Affix  
photo  
here

Age:.....Gender: ( Male / Female )

Date of birth.: .....

Country of Birth: ..... Nationality: .....

Race: ..... Religion: .....

Current residential address: .....

.....

Permanent address: .....

.....

.....

Email address: .....

Contact no. (Local): ..... Contact no. (International):.....

Hobbies: .....

Sport activities: .....

**Particulars of next of kin (to be contacted in an emergency):**

Name of Kin (1) : .....

..... Relationship:.....

Contact no. (Home): ..... (Mobile):.....

Residential address: .....

.....

Name of Kin (2): .....

..... Relationship:.....

Contact no. (Home): ..... (Mobile):.....

Residential address: .....

.....

**ADVISEE INFORMED CONSENT FORM**

*As an advisee I agree that my responsibilities will include:*

1. get approval and verification of the course registered / drop / withdrawal,
2. seek useful and required information on class scheduling, course registration, program planning, and the successful completion of all graduation requirements,
3. get more information on the programme's curriculum structures,
4. engage in planning prior to meetings with advisors,
5. meet the advisor at least TWO (2) times during each semester,
6. understand the policies, guidelines, and rules of the University.

**\*For details, kindly refer to item 4.0 of Academic Advisory System handbook.**

I hereby consent to undergo the Academic Advisory System and will abide by all the rules and regulations.

Advisee's Signature: .....

Date : .....