



IMPORTANT: PLEASE SEE NOTE OVERLEAF.

FOR TREASURY SECTION USE ONLY		FOR REG USE ONLY	
Fees Outstanding	<input type="checkbox"/> Yes* \$ _____ <input type="checkbox"/> No	Received \$ _____ Signature: _____	<input type="checkbox"/> Macau Pass at REG <input type="checkbox"/> BOC Quick Pass at REG <input type="checkbox"/> MPay at REG

Name: _____

Student No.: □-□□-□□□□-□

Academic Unit: FAH FBA FED FHS FLL FSS FST

Contact No.: _____

E-mail: _____

No. of copies applied: _____ (The second copy of the testimonial onwards must be the same as the first copy.)

Language Preference:

Chinese Portuguese English

Additional Information:

Expected Date of Completion

Purpose: _____

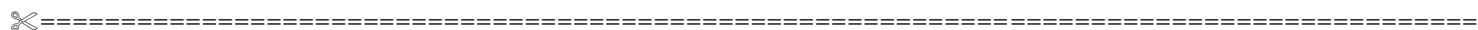
❖ I declare that the information provided in this application form is correct and I have acknowledged and understood the following <Personal Data Collection Statement of the Registry of the University of Macau> stated below:

The University of Macau, in accord to the purpose of providing the related administrative services requested by applicants, requires applicants to fill in this application form and submit to the Registry. The personal data collected in the form will only be used for the mentioned purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures. The transmission of personal information over the Internet may lack protection and security. There is a risk that your information may be accessed or used by an unauthorized third party.

The application will not be proceeded if applicants fail to fill in any of the mandatory fields as required in the application form in accord to the personal-identification and education-related information.

To make correction of your personal data held by the University or to apply for related testimonials, undergraduate students can submit the request to the Registry while postgraduate students should contact the Graduate School.

Applicant's Signature: _____ Date: _____



FOR OFFICE USE ONLY	Registry Stamp	Treasury Stamp
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RECEIPT

Payment of MOP/HK\$ _____ for _____ copy/copies of testimonial from student no.: _____ received.

Date: ____/____/____

Payment

Macau Pass at REG / TRE

BOC Quick Pass at REG / TRE

MPay at REG / TRE

Cash at TRE

Note: ❖ Please bring along with you this receipt for collection after 2 working days. All testimonials will only be kept in file for a month from the date of issue. The Registry will not issue any overdue testimonials.

❖ Please find the "Authorization" on the overleaf if applicable.



FOR OFFICE USE ONLY

Payment of MOP/HK\$ _____ for _____ copy/copies of testimonial from student no.: _____ received.

Date: ____/____/____ Signature & Stamp: _____

Payment

Macau Pass at REG / TRE

BOC Quick Pass at REG / TRE

MPay at REG / TRE

Cash at TRE

NOTE

1. Students must allow 2 working days of processing time (from the date of application) for a testimonial to be issued.
2. MOP/HK\$55 is charged for the first copy of the testimonial. MOP/HK\$50 is charged for additional copy.
3. The second copy of the testimonial should be the same as the first copy.
4. A testimonial is a certification of the student's present registration status with regard to his/her studies at the University.
5. If a student leaves the University in the course of study without going through the check-out procedures, no official document including testimonial will be issued.
6. The University reserves the right to withhold a testimonial from a student who has outstanding fees owing to the University, or who has otherwise failed to discharge all obligations towards to the University.
7. You will be required to present your campus card or personal I.D. card for verification upon collection of the testimonials.
8. Additional bank charges are required for foreign cheque payments. **
9. If you want to settle the application fee by credit card payment, please complete the "Authorization of Credit Card Payment" form (REG/Form/036), which can be downloaded from the Registry webpage: <https://req.um.edu.mo>.

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Place of Issuing Bank	Currency / Cheque	Bank Charges
Macao	Hong Kong Dollar	-----
Macao or Outside Macao	Foreign Currency	MOP50

STATEMENT FOR COLLECTING PERSONAL CONTACT INFORMATION

(For individuals applying for UM services that are covered by the "Public Services and Organizational Performance Review System" and for which user satisfaction surveys will be conducted)

The Macao SAR government is implementing the "Public Services and Organizational Performance Review System" to monitor the quality of services provided by public entities. For this purpose, the University of Macau (UM) hereby seeks your consent to the collection of your personal data for a user satisfaction survey to be conducted in the future for continuous improvement of our service quality.

1. In order to provide the requested service, the application form as you have completed will be submitted to the Registry. The personal data collected therein will only be used for purposes related to your application and your contact information may also be transferred within UM and to entities required by law or with your prior consent, for the purpose of carrying out the related procedures.
2. For improvement of its service quality, UM periodically conducts user satisfaction surveys and your personal contact information may be used for this purpose. The data may be transferred to individuals/institutions in or outside Macao only where the processing of your case requires our contact with those individuals or institutions as well as transmission of your data to them.
3. UM observes the principles regarding personal data protection, ensuring the confidentiality and integrity of the personal data collected.
4. In accordance with the *Personal Data Protection Law*, UM may process your data by automatic or non-automatic means, including comparing your data with those kept by other competent authorities for verification.
5. You have the right to request access to, rectification or update of the personal data conserved in UM in accordance with the *Personal Data Protection Law*.

- I have read and understood the above and hereby unambiguously consent to the processing of the data concerned by the University of Macau.**
- I have read and understood the above but do not consent to the processing of the data concerned by the University of Macau.**

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AUTHORIZATION

I (Name) _____ (I.D. No. _____) hereby authorize
 (Name) _____ (I.D. No. _____) to act on my
 behalf to collect my testimonial(s).

I declare that the information provided in this authorization is correct and I have acknowledged and understood the <Personal Data Collection Statement of the Registry of the University of Macau>.

Signature: _____ Date: _____

Note: Please submit this authorization together with I.D. copies of both parties.

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