



THE PUBLIC SERVICES DEPARTMENT OF MALAYSIA THE PENSION DIVISION



JPA.BP.SPT.B03b

DECLARATION OF STUDENT STUDYING IN THE INSTITUTION OF HIGHER LEARNING

INSTRUCTION	FOR OFFICE USE ONLY
1. Please fill in this form by using BLACK/BLUE ink only. 2. Please use CAPITAL LETTERS . 3. Please tick <input checked="" type="checkbox"/> in boxes with (*).	Ref. No : <input style="width: 100%;" type="text"/> Received Date : <input style="width: 100%; text-align: center;" type="text"/> / <input style="width: 10%; text-align: center;" type="text"/> / <input style="width: 10%; text-align: center;" type="text"/> <div style="display: flex; justify-content: space-around; font-size: small;"> Day Month Year </div>

A PARTICULARS OF DECEASED

1a. Current identity card number <input style="width: 100%; height: 20px;" type="text"/>	1b. Category of current identity card number * <input type="checkbox"/> 01 Old <input type="checkbox"/> 02 New <input type="checkbox"/> 03 Military <input type="checkbox"/> 04 Police
2. Name of deceased <input style="width: 100%; height: 40px;" type="text"/>	

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B STUDENT'S PARTICULARS

1a. Current identity card number <input style="width: 100%; height: 20px;" type="text"/>	1b. Category of current identity card number * <input type="checkbox"/> 01 Old <input type="checkbox"/> 02 New <input type="checkbox"/> 03 Military <input type="checkbox"/> 04 Police
2. Name of student <input style="width: 100%; height: 40px;" type="text"/>	
3. Address <input style="width: 100%; height: 60px;" type="text"/>	
4. Postcode <input style="width: 100%; height: 20px;" type="text"/>	
5. City <input style="width: 100%; height: 20px;" type="text"/>	
6. State <input style="width: 100%; height: 20px;" type="text"/>	7. Country <input style="width: 100%; height: 20px;" type="text"/>
8. Telephone no. <input style="width: 100%; height: 20px;" type="text"/>	
9. Email address <input style="width: 100%; height: 20px;" type="text"/>	
10. Marital status * <input type="checkbox"/> Single <input type="checkbox"/> Married	11. Marriage date (if married) <input style="width: 100%; text-align: center;" type="text"/> / <input style="width: 10%; text-align: center;" type="text"/> / <input style="width: 10%; text-align: center;" type="text"/> <div style="display: flex; justify-content: space-around; font-size: small;"> Day Month Year </div>

State code

Country code

D STUDENT'S DECLARATION

I hereby declare that the above details are correct.

(Signature of student)

Date :

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ONLY**

E CERTIFICATION BY REGISTRAR OF THE INSTITUTION OF HIGHER LEARNING

I hereby certify that the details in section (B) and (C) are correct.

(Signature of Registrar)

Name :

Position held :

Date :

Official seal of the Institution of Higher Learning :

Checked by :

Name :

Position:

Unit :

Date :

Verified by :

Name :

Position:

Unit :

Date :