

Application No : 

**APPLICATION FORM
VERIFICATION OF RECOGNITION OF QUALIFICATIONS**

AGENCY DETAILS:	
Name of Agency:	
Correspondence Address:	
Contact Person:	
Position:	
Contact Number:	
Email:	
QUALIFICATIONS INFORMATION: please provide a separate list if there are more than one (1) qualification	
Name of Qualification:	
Name of Awarding Institution:	
Country of Awarding Institution:	
Level of Qualification:	
Mode of Studies:	Full time / Part Time / Distance Learning
Duration:	
Total Credit Hours:	
Entry Qualification:	
Purpose for Recognition:	

DECLARATION

- We hereby declare that all the information and documents provided to support this application are true, correct and accurate.
- We understand that the Malaysian Qualifications Agency (MQA) reserves the right to reject our application if false or incorrect information is submitted or I have not fulfilled the application requirements.
- We agree that this application is subjected to the following terms and conditions:
- MQA has the right to request for additional information/ documents to support the assessment.
 - The applicant gives permission to MQA to make references to and use the information or data in this application as may be deemed necessary.
 - Documents that are not in English must be accompanied by translations performed by certified translator.
 - Documents are all certified true copy by Malaysian Government Officials (Grade A) or notary public.

I enclosed herewith:

ITEM	PLEASE TICK (/)
Detailed information of the programme	
Evidence of Status of Recognition/Accreditation of the qualification from the country of origin which awards the qualification	
Information on National Qualifications Framework of the respective country	
Supporting document and verification on the status of recognition from Malaysian Embassy or Education Malaysia Office	

* Please tick (/) or cross out as appropriate

Signature : _____

Name of Applicant : _____

Date : _____

Please email your complete form and document to esisraf@mqa.gov.my.

FOR INTERNAL USE ONLY

Application Status:

Complete Incomplete

Signature :

Name of MQA Officer : Date :