



Examination and Graduation Unit, Academic Management Division, Registry

**APPLICATION FORM FOR APPEAL FOR RE-CHECKING OF EXAMINATION RESULTS**

**1. INSTRUCTION TO CANDIDATE**

- 1.1 **Articles 2 to 4 in this form must be properly and completely filled in.**
- 1.2 Payment must be made, which is **RM50.00 for each examination paper reviewed** at Bursary, USM.
  - **Main Campus** : Student Accounts & Revenue Management Section, Bursary, D12 Building, Bursary@USM
  - **Engineering Campus** : Student Finance Section, Bursary
  - **Health Campus** : Student Finance Section, Bursary

**OR**

1.2.1 Via ePayment (Website: <https://epayment.usm.my>)

**\* Payment via cheques WILL BE NOT ACCEPTED.**

1.3 The application form with **A COPY OF PAYMENT RECEIPT/ePAYMENT SLIP** must be sent to:

**(a) FOR STUDENTS OF MAIN CAMPUS, DISTANCE EDUCATION, OFF-SHORE PROGRAMMES AND POSTGRADUATE PROGRAMMES**

Deputy Registrar, Examination and Graduation Unit, Academic Management Division, Registry, Level 5, Chancellory Building, 11800 USM, Penang  
(E-mail: [exam@usm.my](mailto:exam@usm.my))

**(b) FOR STUDENTS OF TUANKU SYED SIRAJUDDIN ENGINEERING CAMPUS**

Senior Assistant Registrar, Academic Management Division, Registry, Tuanku Syed Sirajuddin Engineering Campus, Universiti Sains Malaysia, 14300 Nibong Tebal, Penang  
(E-mail: [bpa.eng@usm.my](mailto:bpa.eng@usm.my))

**(c) FOR STUDENTS OF HEALTH CAMPUS**

Assistant Registrar, Academic Management Unit, Registry, Health Campus, Universiti Sains Malaysia, 16150 Kubang Kerian, Kelantan  
(E-mail: [anizan@usm.my](mailto:anizan@usm.my))

**2. DETAILS OF CANDIDATE**

2.1 Full Name : \_\_\_\_\_

2.2 **NRIC/PASSPORT NUMBER** : \_\_\_\_\_

2.3 **INDEX NUMBER** : \_\_\_\_\_

2.4 Address : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2.5 Programme & Year of Study : \_\_\_\_\_

2.6 Mobile Phone Number : \_\_\_\_\_

2.7 Course(s) to be re-checked: -

NO.	COURSE CODE & TITLE	GRADE	SEMESTER

**3. PAYMENT**

3.1 Amount of Payment = RM \_\_\_\_\_

*(PLEASE ENCLOSE A COPY OF PAYMENT RECEIPT TOGETHER WITH THIS FORM)*

**4. CANDIDATE'S SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_