

If you are under 18 years of age at the time of submitting this application you must have a parent or guardian sign this declaration on your behalf:

Parent/guardian signature: _____

Date: / /

Parent or guardian contact details:

Name of parent/guardian: (circle as applicable)

Parent/guardian's MyKad no. (for Malaysians only):

Table 1. Summary of the main characteristics of the four groups of patients.

Parent/guardian's passport no. (for non-Malaysians only):

Parent/guardian's business telephone:

Parent/guardian's fax:

Parent/guardian's email:

Where the context permits, references to "Monash University" herein this application form means Monash University Malaysia Sdn. Bhd. (Co. No. 458601-U) and/or Monash University (ABN 12 377 614 012).

Di mana konteks membenarkan, rujukan-rujukan kepada "Monash University" di dalam borang permohonan ini bermakna Monash University Malaysia Sdn. Bhd. (No. Syarikat 458601-U) dan/atau Monash University (ABN 12 377 614 012).