

Date :

BURSAR

Universiti Selangor (UNISEL)

Dear Sir / Madam,

LETTER OF AUTHORIZATION

I, _____ / _____ / _____
 (Full name) (Student id) (Faculty & Programme)

Hereby authorize the person as per details below , to collect on my behalf the **Settlement of Fees Form** as per request. The person details as per below:

Name	
MyKAD/ Passport No	
Address	
H/P No	

I also confirm that my representative shall have the authority to sign for acknowledgement of the receipt of the said document. I understand that I shall be fully responsible for the undelivered, if any, of the said document from my representative.

Yours faithfully,

_____ (signature)

**** Copy of Identity Card / Student Card collector is required***

**** Please delete as appropriate***