

Please complete the following information. All of fields are required to help us to provide our pick-up service. If you have any question, please directly contact Ms. Maziani Sabudin at maziani@usm.my.

|  |  |
| --- | --- |
| Applicant Name: |  |
| Affiliation: |  |
| Email: |  |
| Arrival Date: |  |
| Arrival Time: |  |
| Arrival Flight Number: |  |
| Total Number of Passengers: |  |
| Other Passengers’ Name (if any): |  |

Please send this form to Ms. Maziani Sabudin at maziani@usm.my.