***Instructions: This form must be approved BOTH by Programme Leader and DY Coordinator. Once completed, submit the original copy to UBDSBE Office for filing and keep a copy for yourself as a reference.***

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL DETAILS** | | | | | | | | | | | | |
| **Name** |  | | | | | | | | | | | |
| **Reg.No** |  | | **Contact No.** | | |  | **Email** | | |  | | |
| **Major** |  | **Accounting & Finance** | |  | **Business Administration** | | |  | **Economics** | |  | **Actuarial Studies** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DISCOVERY YEAR DETAILS** | | | | |
| **DY Activities** | | **Academic Year** | **Semester** | **Months (Jan-June/July-Dec)** |
| **Student Exchange (one semester abroad)** | |  |  |  |
| **Name of University** |  | | | |
| **Country** |  | | | |
| **Departure Date** |  | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **MODULE DETAILS** | | | | | | | |
| **No.** | **Module Code** | **Module Name** | **Host University** | | | | **UBD** |
| **Credits/**  **Units** | **Contact-hr per wk** | **No. of weeks of study** | **Total contact hours** | **Equivalent**  **MCs** |
| **1** |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |
| **TOTAL UBD MCs** | | | | | | |  |
| ***Info:***   * ***One semester DY activity is equivalent to 16 MCs in UBD.*** * ***Total workload of 8 – 10 hours per week for 14 weeks is equivalent to 4 UBD MCs.*** * ***Or for 14 weeks per semester, 1 contact hour per week is equivalent to 1 UBD MC.*** | | | | | | | |

***Note: Try to provide all the necessary info about the contact-hours, total no.of weeks, etc. If it is unavailable, then leave it blank.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Submission** |  | **Signature** |  |
|  | | | |
| **FOR OFFICE USE ONLY** | | | |
| **Approved by Programme Leader** | | **Approved by DY Coordinator** | |
| **Name** |  | **Name** |  |
| **Signature** |  | **Signature** |  |
| **Date** |  | **Date** |  |

**Suhaimi Ali│UBDSBE 2016**