



**MAHSA**  
UNIVERSITY COLLEGE

# NEW STUDENT REGISTRATION GUIDE BOOK

## **REGISTRATION GUIDE AND RULES**

### **1. WELCOMING ADDRESS**

Congratulations and a warm welcome to all new students who have successfully enrolled to MAHSA University College. We are pleased to welcome all new students to MAHSA University College for a journey in pursuing a career in medical and healthcare. We hope you will put your heart and soul into committing yourself to your studies.

We strongly believe that students will make full use of the time and opportunity given to seek knowledge and skills to be able to achieve greater heights and succeed in the career of their choice. Students are always reminded on the importance of setting goals for themselves in the pursuit of a promising career. Good time management as well as discipline is the recipe to a bright future.

### **2. REGISTRATION PREPARATION**

- i) Medical Check Up Form (page 6) - Your admission is subject to you being confirmed as fit by a Registered Medical Doctor and the Medical check up fees are to be borne by students. Please use the Medical Check Up Form provided.**
- ii) Student Biodata Form (page 5) : Compulsory to be filled by all students.**
- iii) Registration Day Check list (page 3) : Please ensure you bring all documents and forms you are required to submit as per checklist.**
- iv) Hostel Application Form (page 4) : Only for those who wish to stay in the hostel**
- v) Registration Day - Please report to MAHSA University College on the date and time stated in the Offer Letter. All new students will have an orientation Programme and attendance is compulsory. The orientation programme is important for students to familiarize themselves with the University College environment and facilities.**

### **3 FINANCIAL ASSISTANCE (LOAN/SCHOLARSHIP)**

The University College is not responsible in ensuring that students are given loan or scholarship. However, the University college will provide all the assistance needed by students in the application of the respective financial loan or scholarship .

### **4. FEE SCHEDULE**



**FEE SCHEDULE 2012**

PROGRAMME	INTAKE	*REGISTRATION FEE (RM)	** COURSE FEE (RM) PER SEMESTER	NUMBER OF SEMESTERS	TOTAL COURSE FEE (RM)	GRAND TOTAL (RM)
<b>MEDICINE</b>						
Bachelor of Medicine and Bachelor of Surgery (MBBS)	Sept	2,620	30,000	10	300,000	<b>302,620</b>
<b>DENTISTRY</b>						
Doctor of Dental Surgery (DDS)	Sept	2,620	30,000	10	300,000	<b>302,620</b>
Diploma in Dental Technology	Jan	1,320	9,000	6	54,000	<b>55,320</b>
Certificate for Dental Surgery Assistant	Jan	1,320	8,750	4	35,000	<b>36,320</b>
<b>PHARMACY</b>						
Bachelor of Pharmacy (Hons) B Pharm	Sept	2,120	16,000	8	128,000	<b>130,120</b>
Diploma in Pharmacy	Jan, Apr, Jul & Sept	1,320	7000	6	42,000	<b>43,320</b>
<b>NURSING</b>						
B.Sc (Hons) Nursing Practice Development (2+0) <i>Northumbria University, UK</i>	Mar, Apr, Jul & Nov	700	6,250	4	25,000	<b>25,700</b>
B.Sc. (Hons) Nursing Studies (4+0) <i>Teeside University, UK</i>	Jan	1,820	9,000	8	72,000	<b>73,820</b>
Diploma in Nursing	Jan, Apr, Jul & Sept	1,320	7000	6	42,000	<b>43,320</b>
<b>PHYSIOTHERAPY</b>						
B.Sc (Hons) Physiotherapy, <i>Northumbria University, UK</i>	Sept	1,820	10,000	8	80,000	<b>81,820</b>
Diploma in Physiotherapy	Jan, Apr, Jul & Sept	1,320	7000	6	42,000	<b>43,320</b>
<b>BIOMEDICAL SCIENCES</b>						
B.Sc (Hons) Biomedical Sciences (3+0) <i>Northumbria University, UK</i>	Sept	1,820	11,000	6	66,000	<b>67,820</b>
Diploma in Medical Lab Technology	Jan, Apr, Jul & Sept	1,320	7,000	6	42,000	<b>43,320</b>
<b>MEDICAL IMAGING</b>						
Bachelor of Medical Imaging (Hons)	Sept	1,820	9,000	8	72,000	<b>73,820</b>
Diploma in Medical Imaging	Jan, Apr, Jul & Sept	1,320	7,000	6	42,000	<b>43,320</b>
<b>ENVIRONMENTAL HEALTH</b>						
Bachelor of Environmental Health and Safety (Hons)	Sept	1,820	9,000	8	72,000	<b>73,820</b>
Diploma in Environmental Health	Jan, Apr, Jul & Sept	1,320	7,000	6	42,000	<b>43,320</b>
<b>POST GRADUATE STUDIES</b>						
MSc. Nursing <i>Northumbria University, UK</i>	Feb	700	7,000	4	28,000	<b>28,700</b>
MSc. Advanced Healthcare (International) <i>Liverpool John Moores University, UK</i>	Feb	700	7000	4	28,000	<b>28,700</b>
<b>PRE-UNIVERSITY STUDIES</b>						
Foundation in Science	Jan, Apr & Jul	1,520	5,250	2	10,500	<b>12,020</b>

\* The Management reserves the right to change the rate of fees without prior notice.  
\* Tuition fees are payable at the beginning of each semester and fees paid will not be refunded.

## **REGISTRATION DAY CHECK LIST**

Please tick ✓ in the boxes provided as a guideline on the **IMPORTANT** documents and forms you are required to submit on the registration day.

<b>DOCUMENTS &amp; FORMS</b>	<b>(✓)</b>
Offer letter – Original and Photocopy (1 copy)	
Identity Card (IC) / Passport - Original and Photocopy (1 copy)	
Birth Certificate – Photocopy (1 copy)	
Certificate/Slip SPM/SPMV/O-Level – Original and Photocopy (1 copy)	
Higher Certificate Qualification(STPM/A-Level/Matric/Diploma) - Original and Photocopy (1copy)	
Photograph - Passport Size (6pcs)	
Medical Check up Form - (Completed form)	
Student Biodata Form – (Page 5)	
Hostel Application Form *(Only for those who wish to stay in the hostel)	
Payment / Receipts of Payment ( Please refer to the fees Schedule (Page 2)	

### **\*\*REMINDER\*\***

The University College has the right to withhold the offer given if any information given in the application form or any other form is found to be false .

***NOTE :*** *The information in this student guide book is correct at the time it is printed and the University College serves the right to ammend any information in this booklet without prior notice.*

***Registrar's Office  
MAHSA University College***





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## STUDENT BIODATA FORM

Doc. No. : SRE/QF/02

Rev No. : 0

Date : 25 JUNE 2007

### **Student Particulars**

Course : \_\_\_\_\_ Intake(Month/Year) : \_\_\_\_\_

Name : \_\_\_\_\_ IC./ Passport No: \_\_\_\_\_

D.O.B : \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Religion : \_\_\_\_\_ Nationality : \_\_\_\_\_

Gender : \_\_\_\_\_ Place of Birth : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

Mailing Address : \_\_\_\_\_

Tel No (Hse) : \_\_\_\_\_ H/Phone No : \_\_\_\_\_ Marital Status: \_\_\_\_\_

### **Parents/Guardian Particulars**

Name (Father /Guardian) : \_\_\_\_\_ Name (Mother) : \_\_\_\_\_

Office Address : \_\_\_\_\_

Occupation : \_\_\_\_\_ Tel No (Off) : \_\_\_\_\_ H/Phone No : \_\_\_\_\_

### **For Emergency please contact :**

Name : \_\_\_\_\_ Relationship : \_\_\_\_\_

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

Tel No (Off) : \_\_\_\_\_ H/Phone No : \_\_\_\_\_

**I hereby confirm that the above information are all correct and if any information is found to be false, MAHSA University College has the right to terminate me from the course offered.**

**Date : \_\_\_\_\_ Student's Signature : \_\_\_\_\_**



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## MEDICAL CHECK UP FORM

Doc. No. : SRE/QF/04

Rev No. : 0

Date : 25 JUNE 2007

Course : \_\_\_\_\_ Intake(Month/Year) : \_\_\_\_\_

Name : \_\_\_\_\_ IC. No./ Pasport : \_\_\_\_\_

D.O.B : \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Religion : \_\_\_\_\_ Nationality : \_\_\_\_\_

### PHYSICIAN'S REPORT

#### Results / Findings

Height	_____ cm
Weight	_____ kg
Circulatory System	<b>Pulse :</b> _____
Blood Pressure :	<b>Systolic</b> _____ <b>Diastolic</b> _____
General Condition / Any physical deformity	<b>(Yes / No) *</b>
Fits or fainting attacks	<b>(Yes / No) *</b>
Spitting of Blood	<b>(Yes / No) *</b>
Colour Blindness	<b>(Yes / No) *</b>
Respiratory System : Chest X-Ray	
Nervous System	
Tendon Reflexes	
Vision Acuity	
Alimentary System:Any Enlargement of Spleen/Liver	
Genito-Urinary System : Urine	
Hernial Orifices	

**\* If yes , please explain briefly :**

\_\_\_\_\_

**Comments regarding further examinations or recommendations :**

\_\_\_\_\_

I hereby certify that I have examined the above mentioned student and I find the student to be  
**fit / unfit for placement in MAHSA College.**

Doctor's / Medical Officer 's Signature : \_\_\_\_\_ Official Stamp : \_\_\_\_\_

Date : \_\_\_\_\_