

**BORANG D**

AGREEMENT TO RELEASE ACADEMIC REPORTS TO SPONSOR

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(insert name) agree that my academic results / transcripts as well as detailed academic report from my supervisor(s) for my study at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(insert university name) could be released to my sponsoring organizations periodically (preferably every semester) which in this case are to ‘Staffing and Administration Training Section, Public Service Department (Bahagian Keanggotaan dan Pentadbiran Latihan, Jabatan Perkhidmatan Awam)’.

I understand and agree that the university I am currently attending will release the individual transcripts and a copy of the degree certificate to the sponsor who requested this information only.

I also understand that once the University has provided the information to the sponsor, then the University may not be able to prevent my information being passed onto third parties by the sponsor.

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| Signed: |  | Date: |  | |
| Full Name: |  | | | |
| Brunei IC Number: |  | Email: |  | |
| Name of Course: |  | Duration: |  | |
| Course Commencement Date: |  | Expected Completion Date: | |  |

To be returned to:

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| **Staffing and Administration Training Section**  **Public Service Department**  **Prime Minister Office**  **Simpang 156, Jalan Kumbang Pasang BA1311**  **Negara Brunei Darussalam**  **Contact no: +673-2382469 ext.413** |