

MACAU UNIVERSITY OF SCIENCE AND TECHNOLOGY

Confirmation from student's parent

I am/ we are (name of parent or guardian)			, being parent/guardian of student
(name)	(stud	ent no.)	, hereby acknowledge that:
Owing	to the below reasons,	non-local MUST student	s must stay in the student dormitory on the
first aca	ademic year:		
1. As	Assist students from far away places to progressively adapt to the living environment of		
M	acau;		
2. As	Assist students to develop independence, self-management, conduct and academic excellence;		
3. M	Manage students' learning and livelihood effectively;		
4. M	Maintain contact and communication with students;		
5. Pr	Provide students with help and support in learning, livelihood and medical care;		
6. He	Help to ensure the safety of students.		
_		•	lents to move out reason, and also has the ide by the laws of the Territory.
	Ackno	owledgement from	n Parent/Guardian
I am/ w	ve are acknowledge ac	lvice of the above and in	the name of parent/guardian, confirm the
move o	out request of the belo	w student from the studer	nt dormitory.
Name o	of student	:	
Signed	by parent/ guardian	:	
Date sig	gned	:	