

FORM A



الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
يُونُسُ بْنُ سَيِّدِيٍّ الْإِسْلَامِيُّ، أَنْبَاءُ رِغْسِيًّا مَلِكِيًّا

مسجد السلطان الحاج أحمد شاه

OFFICE OF SULTAN HAJI AHMAD SHAH MOSQUE, IIUM

STUDENT PROGRAMME APPROVAL FORM

GUIDELINES :~

- Please fill up the form accordingly.
- Please submit **2 copies of proposal paper** with the completed form to the staff in-charge not less than **10 working days** before the date of the programme for University level and 6 months for international programmes
- All banners, buntings, media statements and official letters must be approved by the Office of SHAS Mosque authority. All posters/banner/bunting put up in the university campus must be removed within two days after end of event.
- Financial and activity reports must be submitted to the staff in-charge not more than **10 working days** after the programme. Please use **the Programme Report** and **Financial Report** forms for this purpose.
- Please refer to the **Students Activities Procedures and Policies Book** for detailed guidelines.
- Any field trip should fill up the Field Trip Checklist Form (OSHBE) – *If Any*

A. PROGRAMME

- 1) Name of Programme : _____
- 2) Organiser/s : _____
- 3) Date/ Day : _____ 4) Time: _____
- 5) Venue : _____
- 6) Expected No. of Participants : _____
- 7) Supervisor/ Accompanying Officer : _____

B. PERSON IN-CHARGE

POSITION	NAME	CONTACT NO.
PRESIDENT		
SECRETARY/ TREASURER		
PROGRAMME MANAGER		
OTHERS (If Applicable)		

C. OUTSIDE ORGANISATION/ SPEAKERS (if any – Please attached the latest CV)

NO	NAME	ADDRESS
1)		
2)		

D. INVITATION OF VIP's

NO	FULL NAME AND DESIGNATION	SESSION	DATE	TIME
1)				
2)				

E. BUDGET

1) TOTAL BUDGET :	RM	_____
IIUM TRANSPORTATION (TYPE) :	RM	_____
GRAND TOTAL :	RM	_____
2) BUDGET REQUESTED FROM :~		
I) SHAS MOSQUE OPERATING (B52201) :	RM	_____
II) SHAS MOSQUE TRUST FUND (T117) :	RM	_____
3) OTHER SOURCES OF INCOME (if any)		
I) FEE	RM	_____
II) SPONSOR (Name of Sponsor) :	RM	_____

I hereby certify all the information stated above are true and correct. Thank you

*President/ Vice President/
Secretary/ Programme Manager*

Date

F. RECOMMENDATION (if any)

1) ADVISOR/ LECTURER

Remarks :

Signature and Stamp

Date

2) PROCESS BY (Name) :

Remarks :

Budget Recommended : **RM** _____

Transport : **RM** _____

Officer in-charge and Stamp

Date

G. APPROVAL FROM THE DIRECTOR OF SHAS MOSQUE

1) DIRECTOR

Remarks :

Budget Recommended/ Approved : **RM** _____

Transport : **RM** _____

Signature and Stamp

Date

2) DEPUTY RECTOR (STUDENT AFFAIRS) (if applicable)

Remarks :

Budget Approved : **RM** _____

Transport : **RM** _____

Signature and Stamp

Date

H. APPROVAL FROM THE EXECUTIVE DIRECTOR OF FINANCE DIVISION AND RECTOR OF IIUM
(for programmes RM 20,000 and above)

1) EXECUTIVE DIRECTOR, FINANCE DIVISION

Remarks :

Signature and Stamp

Date

2) RECTOR

Remarks :

Signature and Stamp

Date



If you have any further queries or comments, please do not hesitate to contact us:
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