



**REQUEST FOR AN APPOINTMENT WITH OMBUDSMAN**  
**OFFICE OF OMBUDSMAN AND INTEGRITY (OMBUDS)**  
International Islamic University Malaysia

**OMBUDS--01**  
Version: 01  
Revision: 0  
Effective Date: 17/07/2020

REQUESTOR'S INFORMATION		
Full Name :		
Staff/Matric No :	Signature of Requestor:    Date :	
K/C/D/I/O (if any) :		
Contact No :		
Email Address :		
YOUR MATTER – Please describe it briefly and clearly in the space provided below		
Please tick the relevant box :	<input type="checkbox"/> CONCERN	<input type="checkbox"/> REPORT ON ALLEGED MISCONDUCT
	<input type="checkbox"/> DISSATISFACTION	<input type="checkbox"/> OTHER
DETAILS OF APPOINTMENT :		
RECOMMENDATION / DECISION FROM <u>OFFICER IN-CHARGE</u>		
Remarks		
COMMENT / RECOMMENDATION / DECISION FROM <u>THE OMBUDSMAN</u>		
Remarks _____		
_____		
_____		
_____		