



# 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 :

K/C/D//O (if any) :

Contact No :

Email Address :

Signature of Requestor:

Date :

## YOUR MATTER – Please describe it briefly and clearly in the space provided below

Please tick the relevant box :

CONCERN

REPORT ON ALLEGED MISCONDUCT

DISSATISFACTION

OTHER

DETAILS OF APPOINTMENT :

## RECOMMENDATION / DECISION FROM OFFICER IN-CHARGE

Remarks

## COMMENT / RECOMMENDATION / DECISION FROM THE OMBUDSMAN

Remarks \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_