****

Workstation: RMC

Version : 00

Revision : 00

Effective : 30/11/2020

**RESEARCH MANAGEMENT CENTRE**

**TRAVELLING ADVANCEMENT FORM**

**INSTRUCTION:**

1. Please ensure the following **documents are attached** with the completed form.
2. All expenses must adhere to the General / Funder Guidelines for Research Funding and IIUM Financial Policy.
3. Researcher is responsible to get the approval from the relevant authority prior to travelling.

**CHECKLIST:**

|  |  |  |
| --- | --- | --- |
| **No** | **Items** | **Check List (Please tick)** |
| 1. | Completed Form with signature | ☐ |
| 2. | Copy of approval form for Attending Seminar/ Conference / Workshop / Training / Data Collection | ☐ |

**NOTE:**

1. The travelling advancement **only cover** **for** food allowance and accommodation (eligibility)
2. The subsequent disbursement of the grant will be made once the researcher produces receipts (original) of the earlier disbursement in order to prove 100% utilization of the said disbursement.

|  |
| --- |
| **FOR OFFICE USE** |
| Document Complete / IncompleteDate: …………………………………. | **Checked by:**Name: …………………………………..Position: ………………………………… |

|  |  |
| --- | --- |
| **A** | **REQUESTOR DETAIL** |
|  | Date: |
| Name of Requestor :  |
| Staff No.: Post and Grade: |
| K/C/D/I : Tel No. / Mobile No. : |
| Project ID : |
|  | Project Title:  |
| **B** | **DETAIL OF TRAVELLING** |
|  |

|  |  |
| --- | --- |
| **NO.** | **DETAIL OF TRAVELLING** |
| **1** | **Destination *(✓ where applicable)*** |
|  | Nature of travelling | ☐Conference / Seminar / Workshop / Training | ☐Local  |
|  |  | ☐Data Collection | ☐Overseas |
|  | Name of Event |  |
|  | City / Country |  |
| **2** | **Date** |
|  | Date of Event |  |
|  | Date of Departure |  | Date of Arrival in Malaysia |  |
|  | Duration of Travelling |  |
| **3** | **RESEARCH VOTE CODE** | **DESCRIPTION OF EXPENDITURE** | **AMOUNT (RM)** |
|  |  |  |  |

 |
| **C** | **DECLARATION BY REQUESTOR** |
|  | 1. I hereby authorized the Executive Director of Finance Division to deduct from my salary if I fail to submit my claim within **THIRTY (30) DAYS** after the date of arrival.
2. For overseas travelling, if the trip is not approved by the Ministry of Higher Education, I hereby authorized the Executive Director of Finance Division to deduct from the my salary with immediate effect.

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **D** | **APPROVAL BY:****HEAD OF RESEARCH (FRGS & RIGS ONLY) / DEPUTY DEAN (POSTGRADUATE & RESEARCH) / DEPUTY DIRECTOR (RMC)** |
|  | Approved Not Approved Comment: ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Stamp: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **FOR FINANCE ZONE 2**  |
| **ADVANCEMENT APPROVED**: Food Allowance : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Accommodation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Total Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |