Endorsement	KPGC 8/2025
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POSTGRADUATE OFFICE
KULLIYYAH OF MEDICINE
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

BENCH AND RESEARCH FEE WITHDRAWAL APPLICATION FORM

This application form is for withdrawal of Bench Fee (for Master and Doctoral Programme) and Research Fee (for Clinical Specialist Training).

A. STUDENT'S DETAIL		
NAME	:	
EMAIL	:	
CONTACT NO.	:	
MATRIC NO.	:	
CITIZENSHIP	:	
PROGRAMME	:	
B. SUPERVISOR'S DETAIL		
NAME	:	
EMAIL	:	
CONTACT NO.	:	
STAFF NO.	:	
AMOUNT REQUESTED (MYR)	:	
REASON FOR APPLICATION (tick one)	:	☐ Reimbursement of research expenses made ☐ Procurement of service and material for research

C. DECLARATION	
I, the student under the said supervisor, hereby declare that all receipts attached are genuine and the claims are true. Signature: Date:	I, the supervisor for the said student, hereby declare that all receipts attached are genuine and the claims are true. Signature: Date:

D. VERIFICATION BY THE DEPUTY DEAN (POSTGRADUATE)

☐ Recommended ☐ Not Recommended

Signature:

Official Stamp: Date: