



IIUM
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

KULLIYAH OF
MEDICINE

**OFFICE OF THE DEPUTY DEAN (POSTGRADUATE, RESEARCH AND INNOVATION)
KULLIYAH OF MEDICINE
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA**

**APPLICATION FORM FOR ATTENDING SEMINAR/ CONFERENCE/
WORKSHOP/SHORT COURSE (*NOT RELATED TO RESEARCH*)**

CHECK LIST

*The application form must be submitted **at least one (1) month** before the date of the seminar/ conference/ workshop/ short course.*

No.	Item / Document	Please tick (√)
1.	Complete Application Form with student's signature	
2.	Brochure of seminar/ conference/ workshop/short course and other supporting documents	
3.	Recommendation from Supervisor	
4.	Approval by Head of Department	

Endorsement	KPGC 9/2026
Version	3
Effective Date	12 October 2026

PART A – STUDENT’S DETAILS

1. Name : _____
2. Matric No. : _____ I/C No / Passport No.: _____
3. Programme: _____
4. Email : _____ Telephone No.: _____

PART B – DETAILS OF SEMINAR/ CONFERENCE/ WORKSHOP/SHORT COURSE

1. Title of the event : _____

2. Date and Duration : _____
3. Venue : _____
4. Name of Organizer : _____
5. Nature of Participation : Paper Presenter / Discussant / Chairperson / Participant
6. Title of paper presentation : _____

7. Please specify the reason why you should attend the seminar/ conference/ workshop/short course.

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PART C – FINANCIAL IMPLICATION

Details of financial incurred:

Description	Amount (RM)	Remarks
Registration Fee		
Air tickets		
Hotel / Lodging		
Total (RM)		

PART D - DECLARATION BY APPLICANT

I hereby affirm that all information stated above is correct. The Kulliyah approval is void if information so provided is false.

Applicant's Signature : _____ Date: _____

PART E – RECOMMENDATION

SUPERVISOR

Recommended / Not Recommended

Comment:

Signature : _____ Date: _____

Name & : _____
Official Stamp

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PART F – APPROVAL

HEAD OF DEPARTMENT

APPROVED / NOT APPROVED

Comment:

Signature :

Date:

Name & :
Official Stamp