

 International Islamic University Malaysia Garden of Knowledge and Virtue	IT DEPARTMENT IIUM KUANTAN CAMPUS JALAN SULTAN AHMAD SHAH BANDAR INDERA MAHKOTA 25200 KUANTAN, PAHANG TEL: 09-570 4444 FAX : 09-571 6774
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Phone Request Form

Report No. :

STAFF INFORMATION

Full Name		Designation	
		Staff No	Ext.
Kulliyah		Mobile No.	
Dept./Unit		Email	
Room No.		Date	
Face-Plate No.			

TYPE OF SERVICES

<input type="checkbox"/> New Telephone Line <input type="checkbox"/> Remove Existing Line <input type="checkbox"/> Move to new location Old Face-Plate No: _____	<input type="checkbox"/> New Fax Line <input type="checkbox"/> New Cabling <i>(Official letter is required)</i> Old Room No : _____
<input type="checkbox"/> Other, (please specify) : _____	
Reason for applying :	

RECOMMENDATION

APPROVAL BY DEPUTY DIRECTOR/HOD ITD

<small>(To be filled by the AD/ICT Coordinator/HOD of Division/Department/Unit and attach additional documents if necessary)</small> <input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended Signature : _____	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature : _____
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FOR IT DEPARTMENT USE ONLY

Action taken by : _____ Completed Date : _____	Position : _____ Remarks : _____
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ACKNOWLEDGEMENT BY USER

<i>I have received the service as per requested :</i>	
Date : _____	Signature/Stamp : _____