

**INTERNATIONAL ACADEMIC VISIT
APPLICATION FORM**

A. APPLICANT INFORMATION (PROGRAM DIRECTOR)	
Name	
Tel. No	
Email	
Matric No.	
Faculty	
B. PROGRAM INFORMATION	
Name of Program	
Program Date	
Program Duration	
Name of Institution / Country	
Program Secretariat	
C. PROGRAM INFORMATION APPENDIX	
List of Participants	Please complete the list of all students and staff involved in the program. (Appendix 1)
Program Summary	Please state briefly what the program is about. (Appendix 2)
D. APPLICANT VERIFICATION	
<p>I confirm that the above information is true.</p> <p>Signature</p> <p>Name:</p> <p>Position:</p> <p>Date:</p>	

FOR OFFICE USE ONLY

E. VERIFICATION OF DIRECTOR OF USIM 'ALAMIYYAH

This application has been reviewed and I ***SUPPORT / DO NOT SUPPORT** this application.

(Signature and Official Stamp)

Date:

F. APPROVAL OF DEPUTY VICE CHANCELLOR (ACADEMIC AND INTERNATIONAL)

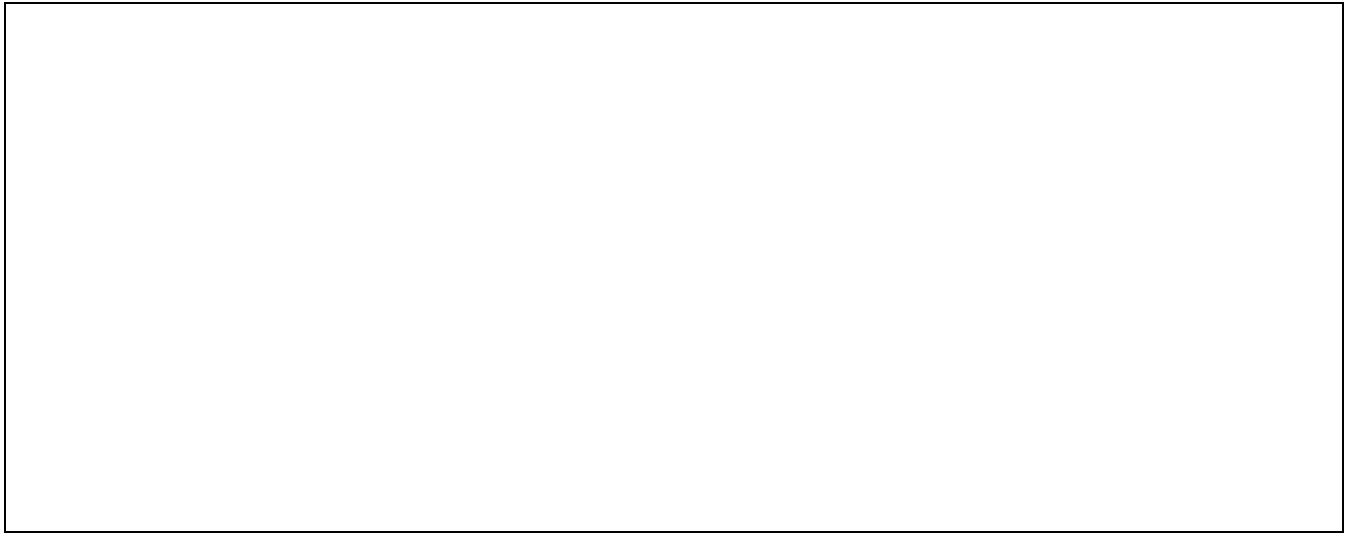
I hereby ***APPROVE / DO NOT APPROVE** this application.

(Signature and Official Stamp)

Date:

***Strikethrough which does not apply**

PROGRAM SUMMARY



Completed forms and attached documents must be sent by hand to:

USIM 'Alamiyyah
Level 1, Commercial Centre,
Universiti Sains Islam Malaysia,
Bandar Baru Nilai, 71800, Nilai,
Negeri Sembilan, Malaysia
+606-797865
mobility.alamiyyah@usim.edu.my