



**OFFICE FOR COMMUNICATION, ADVOCACY & PROMOTION**

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**BOOKING OF AUDIO-VISUAL FACILITIES**

APPLICANT'S DETAILS				
NAME				STAFF NO / MATRIC NO
CONTACT DETAILS	Email Address	Mobile No.	Ext No.	K / C / D / I / O MAHALLAH / CLUB / ASSOCIATION

**EVENT DETAILS**

EVENT NAME		DATE	Start Date	End Date
ORGANIZER		TIME	Exact Start Time	Exact End Time
VENUE		NO. OF PARTICIPANTS		
NAME OF VIP (if any)	*Please attach the approval letter, event schedule, and letter addressed to the VIP.			

FOR APPLICANT	APPROVAL
<p>I hereby agree to accept responsibility and liability for any loss or damage to the University's properties and for any breach of IIUM'S Rules &amp; Regulations.</p> <p>.....            (Signature Person-in-charge)</p> <p>Date : _____ Time : _____</p>	<p>I hereby <b>APPROVE / DISAPPROVE</b> this application.            (Please delete whichever is not applicable.)</p> <p>.....  <b>DIRECTOR / HEAD OF DEPARTMENT /            ASSISTANT DIRECTOR</b>            (SIGNATURE &amp; OFFICIAL STAMP)</p> <p>Date : _____ Time : _____</p>

**TERMS & CONDITIONS:**

- ✓ **Approval (Signature)** must be obtained from the **Kulliyah / Department / Centre / Mahallah** duly the submission of the form
- ✓ **Please Follow-Up** with OCAP (Ext. 4058) **One (1) day after** submitting the form.
- ✓ All applications for booking must be made **Five (5) Working Days** prior to the function date.
- ✓ **Late applications** or **applications without proper approval will not be entertained.**  
 (e.g. no signature and official stamp at the booking form)
- ✓ If the **program is postponed** a new form must be submitted.

FOR OCAP OFFICE USE ONLY		
ACCEPTED		INITIAL / STAMP
REJECTED	Last Minute / Venue Unavailable / AV Equipment Unavailable / Incomplete Form / Others:	DATE

