THE INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
الجامعة الاسلامية العالمية ماليزيا
يونيۏرسيتي إسلام انتارابڠسا مليسيا
*Garden of Knowledge and Virtue*

STUDENT
SSD SERVICES
DEPARTMENT
IIUM KUANTAN CAMPUS

# STUDENT EMPLOYMENT ON CAMPUS (SEOC) PROGRAMME CLAIM FORM

Name : _____

Matric No : _____

Department : _____

Bank Account No. : _____

Bank : _____

Month / Year : _____

| Date | Time In | Time Out | Total Hours | Duties | Sign |
|------|---------|----------|-------------|--------|------|
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|      |         |          |             |        |      |

Rate Per Hour : RM_____        Total Hours Claim: _____

Total Claim : RM _____

*"In the name of Allah, I hereby declare that all information given in this form is true and correct".*

_____

(Requestor signature)

Date:

*Recommended / Not recommended:*  *Verified by:*


_____  _____
(Authorised officer in charge)  Assistant Director
Official stamp:  Student Services Department (SSD)
Date:  Official stamp:
  Date:


*Approved by:*


_____
Deputy Campus Director
Student Development & Support Services
Official Stamp:
Date       :

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For finance use:

Source of fund : OCD TRUST FUND.
Vote              : T 116 – 0001

Checked by    : _____        Date: _____
Official stamp  :
Remarks:

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**Checklist:**

- ✓ *Attendance record for SEOC Program (original)*
- ✓ *Copy of offer letter*
- ✓ *Copy of bank statement / bank book*