CREDITED CO-CURRICULAR UNIT (CCU)
USRAH TEACHING CLAIM FORM

الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
Garden of Knowledge and Virtue

LEADING THE WAY
KHALĪFAH • AMĀNAH • IQRA' • RAHMATAN LIL-ĀLAMĪN

Form No.: 03
Version No.: 03
Revision No.: 03
Effective Date: 24/06/2024

Name: _____ Position: Please choose one Organisation: Please choose one Contact No: _____

Course Title: _____ Course Code: _____ Section: _____ Semester/Year: _____

Bank: Please choose one Account No.: _____ IC/Passport No.: _____

INSTRUCTION: Please key in the duration of the class E.g., 2 for 2 hours.

MONTH / DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total hours
JAN																																
FEB																																
MAC																																
APR																																
MAY																																
JUNE																																
JULY																																
AUG																																
SEPT																																
OCT																																
NOV																																
DEC																																

IMPORTANT NOTE: Please attach the original attendance record of your trainees/students.

Total Hours Claim	0.00

☐ I hereby agree that this claim is true.

Rate per semester (RM)	350.00

_____ Facilitator's Signature

_____ Facilitator's Name

_____ Date

TOTAL CLAIM (RM)	350.00

Recommended by:

_____
Coordinator CU Kuantan
Date:

Approved by:

_____
Director
(Adminstration)
Date: