



INVITATIONAL PROGRAMME FORM

1. Name of Programme :

2. Date :

3. Venue :

4. Organizer:

5. Club/Society Involved :

6. Student In Charge :

Contact No :

Staff In Charge :

Contact No :

7. BUDGET REQUESTED : RM

No.	PARTICULARS	AMOUNT (RM)
1.		
2.		
3.		
4.		
5.		
TOTAL (RM)		

8. SOURCE OF BUDGET:

i. Student Development

RM

vii. CiTRA

RM

ii. Mahallah

RM

viii. Others

RM

iii. Kuliyah

RM

iv. Sports Development

RM

v. CCSD

RM

vi. IWON

RM

CHECKLIST	YES	NO
Appropriate no. of days for approval		
Suitability of date		
Availability of students		
Transport Required		
CHECKLIST	RM	RM
Total budget utilized by the club this year		
Budget Recommended		

9. RECOMMENDATION :

Officer in charge /Assistant Director/Fellow/Club Advisor/Programme Advisor

Remarks : _____

Signature and Stamp : _____

Date : _____

10. RECOMMENDATION: DEPUTY DEAN/PRINCIPAL/HEAD OSC

☐

Recommended

☐

Not Recommended

Remarks : _____

Budget Recommended : RM _____ Transport : _____

Signature and Stamp: _____ Date : _____

11. APPROVAL: DEPUTY CAMPUS DIRECTOR (SDSS) / DEAN

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Approved

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Rejected

Remarks : _____

Budget Approved : RM _____ Transport : _____

Signature and Stamp: _____ Date : _____