

PERMISSION TO TRAVEL (LOCAL/OVERSEAS) FORM

To be completed by the UM Student.

Form must be typed and to be submitted to the Office of the Deputy Vice-Chancellor
(Academic & International) NOT LESS THAN 21 DAYS before the travel date.



To:
Associate Vice-Chancellor (International)
Office of the Deputy Vice-Chancellor
(Academic & International)
Level 9, Chancellery
University of Malaya 50603 Kuala Lumpur MALAYSIA
Tel: 03-79677928/7929/7930 Fax: 03-79572314
Email: pnca@um.edu.my

Name of Applicant	Dr/ Mr/ Mrs/ Ms _____				
Matric No.		<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Master	<input type="checkbox"/> PhD	
Department	Faculty/Academy/ Institute/Centre				
Contact Details	Office	HP	Email		
*Title of Activity/ Event	_____				
*Venue:	_____		*Country		
*Justification for attending the visit	_____				
*Please attach supporting document (Letter of invitation, etc)					
Travelling Period	Start Date		End Date		
Source of financial assistance for the visit	<input type="checkbox"/> University	<input type="checkbox"/> Faculty	<input type="checkbox"/> Research Grant	<input type="checkbox"/> Sponsorship	<input type="checkbox"/> Others
	Please specify	Account No: (if from University/Faculty/Grant)		Name of Sponsor: Others (if any):	

Signature

Name

Date

Comment by Student's Supervisor:

Comment by Deputy Dean (UG/PG):

Signature

Name

Official Stamp

Date

Signature

Name

Official Stamp

Date

RECOMMENDATION BY THE DEAN/DIRECTOR (FACULTY/ACADEMY/INSTITUTE/CENTRE)

Signature

Name

Official Stamp

Date

FOR OFFICE OF THE DEPUTY VICE-CHANCELLOR (ACADEMIC & INTERNATIONAL)'S USE

Approval by:

Approved

Not approved

Reason:

Associate Vice-Chancellor (International)

Name

Official stamp

Date