

## OFFICE OF THE DEPUTY RECTOR INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA (ACADEMIC AND INTERNATIONALISATION) INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

## **REQUEST OF DATA/STATISTICS**

Name	:
I.C./Passport No.	:
Programme of Study/Year/Kulliyyah	:
Contact No./Email	:
Details of Required/Data	:
Propose :	
<u> </u>	
l,	undertake that the requested data/statistics will be used
•	and under no circumstances will it be used for any other
	on to other parties without prior permission from IIUM. I am
•	rtaking; the University has full right to take any appropriate
action including legal action against me.	
Signed by :	
Name :	
Matric No. :	
Date :	
SUPERVISOR'S CONFIRMATION	DEAN/DIRECTOR'S COMMENTS (AMAD/CPS)
This is to confirm that the above-mention	
student is a fully registered student of IIUN affirm that the data/statistics requested	
needed for research and academic purposes of	
Signed by:	Cinned hun
signed by.	Signed by:
Name :	Name :
Date :	Date :
This condition is to be forwards	
ints application is to be forwarded	d to the Office of the Deputy Rector (Academic and

**Approved / Not Approved** 

Deputy Rector (Academic and Internationalisation)

Date :

[ODRAIL/rz/May2018]/ODRAI/nls/Oct2021)