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| --- | --- |
| Date of Proposed Visit : |  |
| Time of Proposed Visit :  |  |

|  |
| --- |
| **Details of Person Making the Visit Request** |
| **Name** |  |
| **Position** |  |
| **Organisation** |  |
| **Website** |  |
| **Email** |  |
| **Telephone** |  |
| **Mobile Number** |  |

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| **Overview of the Institution / Organisation:** |
|  |

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| **Objectives of the Visit:** |
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| --- |
| **Person(s) / Faculties / Departments You Would Like To Meet:** |
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| --- |
| **Specific Areas / Topics of Interest for Discussion:** |
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| **Do you have any previous association with Universiti Kebangsaan Malaysia?** |
|  |

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| --- |
| **Leader of Delegation / Visiting Group:** |
| **Name**  | **Position** | **Email** | **Contact No** |
|  |  |  |  |

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| **Contact person at Universiti Kebangsaan Malaysia, if any:** |
| **Name**  | **Position** | **Email** | **Contact No** |
|  |  |  |  |

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| --- |
| **List of Delegates / Visitors:** |
| **No.** | **Name** | **Position** | **Department / Faculty** | **Email** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
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| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |

*\*Please use attachment if necessary*

**Thank you for completing the Visitor Request Form.**

**Kindly email snkamaliah@ukm.edu.my if you need any assistance.**