

**BORANG PERMOHONAN LAWATAN ANTARABANGSA KE UKM
(VISITOR REQUEST FORM)**

Please complete this form at least **two (2) weeks** prior to the date of your proposed visit.
Please submit completed form to partnerships@ukm.edu.my

Date of Proposed Visit : _____

Time of Proposed Visit : _____

Details of Person Making the Visit Request

Name	
Position	
Organisation	
Website	
Email	
Telephone	
Mobile Number	

Overview of the Institution / Organisation:

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Objectives of the Visit:

Information on UKM
 Admission / Academic Matters
 Academic Promotions
 Student / Staff Exchange
 Research
 Collaboration
 Others (Please specify):

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

Contact person at Universiti Kebangsaan Malaysia, if any:

Name	Position	Email	Contact No

List of Delegates / Visitors:

- *Maximum number of visitor is limited to 30 pax per visit. If your delegation comprises of more than 30 pax, we will require the faculty's permission before accepting your request for visit.*

No.	Name	Position	Department / Faculty	Email
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				

**Please use attachment if necessary*

Thank you for completing the Visitor Request Form.

We would also like to request your kind assistance in *confirming the meeting by emailing us again before the meeting date* (possibly on 3 days before the visit) as to ensure that we have made the necessary arrangements for the visit.

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