

Please submit this form to Program Development & Customer Relation Division, School of Graduate Studies, UTM
 Johor Bahru

Tel. No.: 07-5537773

Fax No. : 07-5537800

1. COURSE DETAILS

Faculty				
Title				
Year	Year 1			
	Year 2			
	Year 3			
Date				
Venue				
Speaker (s)	1. 2.			
Facilitator				
Total Attendance	Ph.D	Year 1	/	
		Year 2	/	
		Year 3	/	
	Master	Year 1	/	
		Year 2	/	
	Others			
	TOTAL			
	<i>*Per total attendance</i>			
Expenditure Details	APPROVED BUDGET		ACTUAL BUDGET	
	Details	RM	Details	RM
	Meals		Meals	
	Speaker		Speaker	
	Facilitator		Facilitator	
	Stationeries		Stationeries	
	Printing		Printing	
	Contingency		Contingency	
	TOTAL		TOTAL	

Claim Recipient (UTM Staff / Student)				
	Name			
	Staff ID / Matric No.			
	Bank			
Account No.			<p>*Please attach the account statement (COMPULSORY) if the recipient is UTM student.</p>	
Course Summary				
Participant's Feedback Summary	<p>*Please summarize (based on average) the analysis of participant's feedback about the course with the following scale: <i>1 – Very Satisfied</i> <i>2 – Somewhat Satisfied</i> <i>3 – Satisfied</i> <i>4 – Very Satisfied</i></p>			
	Course Organization (Refer to Q1 - 2)	Speaker Expertise (Refer to Q3 - 4)	Course Effectiveness (Refer to Q5 - 8)	Course Benefits (Refer to Q9 - 11)

2. CHECKLIST

*Listed here are the documents that need to be attached with the report. Any document in softcopy form can be emailed or installed in a CD.

No.	Type of Document	Check (/)
1	Original receipts / invoice (verified by the faculty) <i>*Please ensure that the supplier's company name stated in the receipt / invoice. If not, please ask them to stamp on the receipt / invoice</i>	
2	Copy of the appointment letter of speaker / facilitator	
3	Copy of the approval letter from SPS	
4	Attendance list with signatures (original hardcopy)	
5	Attendance list in excel format (softcopy)	
6	Photos during the program (hardcopy & softcopy)	
7	Abstract book / Journal / Proceeding (hardcopy & softcopy) <i>*If any</i>	
8	Presentation slide (softcopy)	
9	Participant Feedback Form & Analysis	
10	Program Tentative	
11	Organization Chart	
12	Speaker's / facilitator's account statement <i>*Only needed for non UTM staf</i>	

3. FACULTY VERIFICATION

***Verified by faculty's PGSS Advisor / Deputy Dean (Academic)**

Nama <i>Name</i>	
Tandatangan & Cop Rasmi <i>Signature & Official Stamping</i>	
Tarikh <i>Date</i>	

4. SPS VERIFICATION

***Verified by SPS Deputy Dean**

Nama <i>Name</i>	
Tandatangan & Cop Rasmi <i>Signature & Official Stamping</i>	
Tarikh <i>Date</i>	