

## STUDENTS' ATTENDANCE & PROCESSION/ SEATING ARRANGEMENT COMMITTEE

## REQUEST FOR ASSISTANCE DURING CONVOCATION

Name	:
Matric No	:
Tel. no (Handphone)	:
Home address	:
Email address	:
Kulliyyah	÷
Program	:
Convocation date	: Convocation session :
Seat No.	: (Kindly check your seat number before submit this form)
Type of disability	: Handicapped (legs) on wheelchair just had an operation
	Pregnant weeks
	Blind / low vision
	Hearing impaired
	Other health problem Please state
Do you need special s	etting arrangement? : Yes / No
Student's signature:	Date:

For further inquiry, you may call Br. Fadhlullah at 0 11-1199 1989

Please email this form to <a href="mailto:fadhlullah@iium.edu.my">fadhlullah@iium.edu.my</a> (before 8<sup>th</sup> November 2019)