Updated July 2010 Version 1: Revision 1

## MISCELLANEOUS ADVANCE FOR HUM STAFF

PERSO	DNAL DETAILS	
Name: _		
Post and	d Grade:	
Basic Salary: Staff No.:		
Kulliyy	ah/Department:	
MISCE	ELLANEOUS EXPENSE DETAILS	
Name o	of Program:	
Program	n Date:	
Type of Expense:		
Amount Requested:		
Approved Proposal:		
1.1 I hereby declared that I will strictly adhere to the IIUM Policy on Cash Advancement and fully cognizant on the rules and regulation as stipulated therein. I am also aware that the cash advance will be released to me within two (2) weeks prior to commencement of program.		
1.2	I hereby authorized the Executive Director of Finance Division to deduct from my salary if I fail to submit the financial report to offset the above advancement within (30) THIRTY DAYS after completion of the program.	
Wassal	lam.	
Applic	ant's signature	Recommended/Not Recommended
:		Dean/Director/Head of Department
	FOR FINANCE DIVI	SION
Application Approved/Not Approved		
		Executive Director Finance Division