**APPLICATION FOR PROGRAMME VALIDATION**

**Institution/Organization:**

**Program Title:**

**Speaker Name/Designation:**

**Program Date:**

**Program Time: \_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_**

(start time) (end time)

**Brief description of Activity (less than 100 words):**

*For in-house presentations and workshops, indicate the target audience and learning objectives of activity***.**

*Workshop applications should be accompanied by workshop programme/ flyer/ brochure to specify facilitator/co-facilitator involvement.*

**Name, Designation of Applicant:**

Click here to enter text.

**For office use Reference Number:**

**Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date reviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Academic committee decision:**

**Approved, \_\_\_\_\_\_\_\_\_ Credit Points.**

**Not Approved, Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Academic Chairperson Signature/Date**