



QAIWAN
INTERNATIONAL UNIVERSITY

**Qaiwan International University
Directorate of Quality Assurance & Scientific Affairs**

Faculty:

Coordinator name:

Semester / Academic year:

Date of the Report:

The Events that has been done (ex: Seminar, Workshop, Symposium...etc.):

Upcoming Events (ex: Seminar, Workshop, Symposium...etc.):

Lecturer's Coordination (ex: sending emails, conduction meeting...etc.):

Any other comment / request:

Name
Signature