|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section A: Applicant’s Particulars** | | | | |
|  | | | | |
| Name: |  | | Staff ID/No: |  |
| Faculty: |  | Department: |  | |
| Mailing Address: |  | | | |
| Primary Email: |  | Secondary Email: |  | |
| Office Phone No: |  | Mobile Phone No: |  | |
| Field of Expertise: |  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant’s Signature & Stamp:** |  | **Date:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Section B: Recommendation from Research Centre (RC) or Centre of Excellence (CoE)** | | | |
| Effective Date: |  | | |
| ***RC or CoE*** | | ***Membership Title*** | ***Signature & Stamp by Director of RC/CoE*** |
|  | |  | Date: |

|  |  |  |
| --- | --- | --- |
| **Section C: Recommendation from Director of Research Institutes (RI) (\*if applicable; for RC ONLY)** | | |
| ***Research Institute (RI)*** | ***Remarks*** | ***Signature & Stamp by Director of RI*** |
|  |  | Date: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Section D: Secretariat, Office of Deputy Vice Chancellor (Research & Innovation)** | | | |
|  | | | |
| Remarks: |  | | |
|  | | | |
| **Signature & Stamp:** |  | **Date:** |  |

***GUIDELINES:***

1. Application form has to submit the completed form to Office of Deputy Vice Chancellor (Research and Innovation) (Attention to: Strategic Unit).
2. The process for member appointment could take up to 5 working days, provided completed form is submitted to Office of DVCRI.
3. Please attach the TOR together with the completed application form in English.
4. KPI of the external fellow is subjected to the mutual agreement (TOR) between the fellow and the CoE/RC Director.
5. Any enquiries regarding appointment letter, please contact Mr Chew, teonghan@utm.my, 07-5531202, Mr Naim, nazirulnaim@utm.my, 07-5530551