|  | **PUSAT PENGURUSAN PENYELIDIKAN (RMC)** | **Semakan : 1**  **Pindaan :**  **Dokumen Asal : UTM/RMC/F/0106** |
| --- | --- | --- |
| **JUNIOR VISITING RESEARCHER (JVR)**  **APPLICATION FORM** | | |

**INSTRUCTION:**

1. Application should be made by Principal Investigator (PI) / Supervisor.
2. This application form is use to provide information for **SENIOR DIRECTOR OF COE /**

**DIRECTOR OF HICOE / HEAD OF RESEARCH GROUP when completing Section C.**

1. Candidate/ potential research fellow should prepare supporting documents which will be uploaded through this Google Form ([Junior Visiting Researcher Application Form](https://forms.gle/FAAsZEy1Jc8d9rvR7))
2. Supporting documents required to be attached in RADIS system are as follows:
3. Complete **JUNIOR VISITING RESEARCHER (JVR) Application Form**
4. Latest Curriculum Vitae (CV)
5. Latest Passport Size Photo
6. Certified Copy of MyKad (for Local Candidates) / Passport & Visa (for International Candidates)
7. Certified Copies of Academic Certificates (Diploma/Degree/Masters)
8. Student Status Letter from Faculty (Proof of Waiting for VIVA or Senate Letter)
9. Copy of Bank Account Information
10. Research Proposal (Appendix A)
11. List of Publications (Accepted/Published publications only) (Appendix B)

**SECTION A**

*(To be completed by the JVR candidate)*

| **PERSONAL PARTICULARS** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name (write in BLOCK Letters and UNDERLINE Surname/family name) | | | | | | | *Photograph of Candidate* |
| Permanent address | | | | Tel (mobile) | | | |
| E-mail | | | |
| Mailing address | | | | Emergency contact  Name :  Relationship:  Tel (mobile) : | | | |
| Date of birth | | Age | | \* Marital Status:  Single/Married/Divorced | | | |
| Gender: Male/Female | | Nationality | | Religion | | | |
| MyKad Number  *(for Malaysian candidate)* | | Passport & Visa Details (*for international candidate*) :  Passport No.  Expiry Date  Place of Issue  Current Visa Pass Type  Current Visa Expiry Date | | | | | |
| **ACADEMIC QUALIFICATIONS** | | | | | | | |
| Qualifications Type | Diploma | | Bachelor | | Master | Doctorate | |
| Name of certificate Class/CGPA  Field Year  Name and  place of institution attended |  | |  | |  |  | |

| **JVR APPOINTMENT DETAILS** | | |
| --- | --- | --- |
| Junior Visiting Researcher (JVR) offers a minimum of **THREE (3) MONTHS** to maximum appointment of **SIX (6) MONTHS**.  Proposed date and duration of appointment.  Appointment Date : 01/\_\_/2024(***start date***) to \_\_/\_\_/2024(***end date***) - \_\_\_\_ months (***duration***) | | |
| **CANDIDATE’S DECLARATION** | | |
| I hereby proclaim that all information given as stated above is accurate and true. I understand that any inaccurate or false information or omission of material information will render this application invalid and that, if admitted and awarded Junior Visiting Researcher (JVR) on the basis of such information, my candidature can be terminated, and I can also be subjected to any penalty in the agreement.  Name :  Signature : Date : | | |

**SECTION B**

*(To be completed by the Supervisor)*

| **PRINCIPAL INVESTIGATOR/ SUPERVISOR’S PARTICULARS** | | |
| --- | --- | --- |
| Name | | |
| Title of position held | | \*Status of position held: Permanent/Temporary/Contract/ Assignment/Secondment or others (please indicate) |
| Are there any possibilities that you will retire/going for sabbatical leave/be transferred to other places/end your contract within the proposed appointment period of this applicant? | | |
| Are you the Main or co-supervisor to the candidate? (Please ✔ option below) | | |
|  | Main Supervisor | |
|  | Co-Supervisor | |
|  | Others. Please state: \_\_\_\_\_\_\_\_\_\_ | |
| **PROPOSED RESEARCH INFORMATION** | | |
| Project Title |  | |
| Project Abstract |  | |
| *Please attach full project proposal in the google form* | | |
| Signature & Stamp | | |

**SECTION C**

| **SENIOR DIRECTOR OF COE /**  **DIRECTOR OF HICOE / HEAD OF RESEARCH GROUP** |
| --- |
| | **SUPPORT** |  | | --- | --- | | **NOT SUPPORT** |  |   **COMMENTS**  :  Name :  Signature : Date : |
| **CHAIR OF RESEARCH ALLIANCE** |
| | **RECOMMENDED** |  | | --- | --- | | **NOT RECOMMENDED** |  |   **COMMENTS**  :  Name :  Signature : Date : |



*THANK YOU.*

*RESULT WILL BE NOTIFIED BY THE SECRETARIAT BY EMAIL.*

***OUR CONTACT:***

*JUNIOR VISITING RESEARCHER SECRETARIAT*

*researchfellow.rmc@utm.my*