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| **A. PERSONAL PARTICULARS** |
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| Full Name:  |
| NRIC/Passport No.: | Date of Birth: | Age: |
| Gender: | Marital Status: | Nationality: | Race: |
| Permanent Address: |
| Correspondence Address: |
| Telephone No.(Home): | Mobile No.: | Email Address: |

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 **B. CURRENT PROGRAMME ENROLLED IN UTS**

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| --- | --- |
| School: | Student ID No.: |
| Programme: |
| Title of Project: |
| Name of Main Supervisor: | Semester and Year enrolled: |

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| **C. EDUCATIONAL BACKGROUND** |
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| **Name of Institution** | **Country** | **Degree** | **Major** | **CGPA** | **Date** |
| **From**  | **To** |
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| **D. LANGUAGE PROFICIENCY** |
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| **Language** | **Poor (1)** | **Moderate (2)** | **Good (3)** | **Very Good (4)** | **Excellent (5)** |
| English |  |  |  |  |  |
| Bahasa Malaysia |  |  |  |  |  |

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|  **E. WORKING EXPERIENCE** |
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| **Designation** | **Name & Address of Employer** | **Salary per Month (RM)** | **Employment Period** | **Reason for Leaving** |
| **From****(month/yr)** | **To****(month/yr)** |
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| **F. APPLICATION DECLARATION** |

I hereby declare that the above information is true and correct. If any of the information I have furnished either intentionally or unintentionally is found to be untrue, I understand that UTS reserves the right to terminate my appointment or take any other action as it deems appropriate.

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| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Note: Please attach certified copy of IC/passport and student offer letter.**

 **G. RECOMMENDATION BY MAIN SUPERVISOR**

The Graduate Research Assistant is required to conduct his/her tasks for **minimum 6 hours per week** and **should not be more than 18 hours per week**.

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| **Tasks to be assigned to the applicant:** |
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⬜ Recommended – Allowance: RM \_\_\_\_\_\_\_\_\_ per months ⬜ Not Recommended

Title of Research Grant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Funder of Research Grant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appointment Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Duration of Appointment: \_\_\_\_\_ month(s)

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| Signature: | Name & Official Stamp: | Date: |

 **H. APPROVAL BY CENTRE FOR RESEARCH & DEVELOPMENT**

 **⬜** Approved ⬜ Not Approved

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| Duration of Appointment:  month(s) | Appointment Start Date: | Appointment End Date: |
| Comments: |
| Signature: | Name & Official Stamp: | Date: |