Close-up of a business card

Description automatically generatedA purple and white triangle logo

Description automatically generated

Date:

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

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

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

**E:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**T: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dear Sir/Madam,

**APPOINTMENT AS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FOR THE PROJECT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

2. We are pleased to inform you that you have been identified for appointment as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the Project \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the period from \_\_\_\_\_\_\_\_\_to \_\_\_\_\_**. During this period, you will receive an honorarium of** RM\_\_\_\_\_\_\_\_\_\_ per day/month/year/semester.

3. The job description is as follows:

3.1 .............................

3.2 .............................

3.3 .............................

4. If you have further enquiries regarding this matter, you may contact the person-in-charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ via email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

5. Attached to this letter of appointment is a reply form for further action. This form must be returned to the person-in-charge within seven (7) days from the date of this letter.

Thank you.

Yours sincerely,

.................................................................................

NAME:  
POSITION:

..................................................................................................................................................................

For Office use only

APPROVED NOT APPROVED

.................................................................................

Prof Madya Dr. Nurzalina Abdul Karim Khan

Dean

**REPLY FORM**

Date:

Dean

School of Pharmaceutical Sciences

Universiti Sains Malaysia

11800 Pulau Pinang (Attn: Name of PIC)

Dear Sir/Madam,

**APPOINTMENT AS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FOR THE PROJECT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I hereby refer to my personal information as detailed below and \*agree / do not agree to accept the appointment as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the Project entitled\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the period from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_**, with an honorarium of RM\_**\_\_\_\_\_\_\_\_\_ per day/month/year/semester.

Full Name (as per IC/Passport) :  
IC/Passport Number :  
Organization/Institution/School :  
Bank Account Number :  
Bank Name :

Thank you.

Yours sincerely,

…………………………

(Signature)

Date :

\*cross out where not applicable