**Permohonan Bantuan Kewangan/Kelulusan Untuk Menghadiri**

**Persidangan/Seminar/Bengkel/Kursus Dalam Negeri**

***(Application For Financial Aid/Approval To Attend Conference/ Seminar/Workshop/Course In Malaysia)***

**PUSAT PENGAJIAN SAINS FARMASI**

***(School Of Pharmaceutical Sciences)***

**BAHAGIAN A – MAKLUMAT PEMOHON**

*Section A – Applicant’s Details*

Nama/*Name:*  No. Matrik/*Matric No.:*

No. Kad Pengenalan/No. Pasport:Alamat E-mel :

*Identity Card No./Passport No.: E-Mail Adress*

|  |  |
| --- | --- |
| **Ijazah / *Degree*:** |  **Jawatan / *Position*:** |
| Sarjana/*MSc, MPharm.*: |  |  Pegawai Penyelidik/*Research Officer*: |  |
| PhD/*PhD*: |  |  Pembantu Penyelidik/*Research Assistant:* |  |
| Pasca Siswazah/*Post Doctoral:* |  |  \*Lain-lain*/Other:* |  |
|  |  \*Sila Nyatakan*/Please explain:* |

Bidang Penyelidikan/Research Area:

No. Telefon Makmal/ Lab Telephone No: No. Telefon Bimbit/ Handphone No.:

Alamat Rumah / :

Address of

Residence

**BAHAGIAN B – TUJUAN**

*Section B – Purpose*

*Persidangan/Conference: Seminar/Seminar: Bengkel/Workshop: Kursus/Course:*

|  |
| --- |
| **Jenis / *Type:***  |
| Pembentang Oral/*Oral Presenter*: |  |  Peserta/*Participant*: |  |
| Pembentang Poster/*Poster Presenter:* |  |  \*Lain-lain*/Other:* |  |
|  |  \*Sila Nyatakan*/Please explain::* |  |

 Nama Persidangan/Seminar/Bengkel/Kursus:

*Name of Conference/ Seminar/Workshop/Course*

Tajuk Persembahan*/Title Of Presentation:*

i)

ii)

Tempat/*Venue* :

Tarikh Persidangan/Seminar/Bengkel/Kursus/*Date* *of Conference/ Seminar/Workshop/Course:*

*Dari/From:* Hingga/*Until* : Jumlah hari/ *Total No. of days:*

**Status/*Status:***

Dijemput/*Invited:* Perbelanjaan Sendiri/*Own Expenditure:*

Bantuan Kewangan Geran Penyelidikan Pensyarah/*Financial Aid From Lecturer’s Research Grant:*

Bantuan Kewangan P.P. Sains Farmasi/ *Financial Aid From School* *of Pharmaceutical Sciences:*

**BAHAGIAN C – PERAKUAN PEMOHON**

*Section C – Applicant’s Comfirmation*

Saya mengesahkan bahawa maklumat di atas adalah benar dan semua dokumen sokongan yang berkenaan telah dilampirkan bersama permohonan ini.

*I confirm that the above information is true and all supporting documents are enclosed with this application form.*

Tandatangan Pemohon*/ Applicant’s Signature:* Tarikh*/Date:*

**BAHAGIAN D – PERAKUAN PENYELIA UTAMA**

*Section D – Main Supervisor’s Endorsement*

Disokong: Tidak Disokong: Amaun Diluluskan: RM

*Recommended Not Recommended Approved Amount*

No. Geran Penyelia Pensyarah/*Lecturer’s Research Grant No.:*

Nama Penyelia Utama/ *Main Supervisor’s Name:*

Tandatangan Penyelia Utama: Tarikh*/Date:*

*Main Supervisor’s* *Signature*

Cop Rasmi/*Official Stamp:*

**BAHAGIAN E – KELULUSAN DEKAN PUSAT PENGAJIAN SAINS FARMASI**

*Section E – Approval by the Dean of School of Pharmaceutical Sciences*

Lulus/*Approved*: Tidak Lulus/ *Not Approved*:

Amaun Diluluskan/*Approved Amount:*

RM100.00 RM150.00 RM200.00 RM250.00 Lain-lain/*Others:*

Tandatangan Dekan / *Dean’s Signature*: Tarikh*/Date:*

Cop Rasmi/*Official Stamp:*

*-/cly/raj.*

*Borang Permohonan Kelulusan Menghadiri Persidangan/Seminar/Bengkel*