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Please tick (√):

*Affix recent*

*Passport photo*

**1st INTAKE**

**APPLICATION FORM**

**2nd INTAKE**

POST-DOCTORAL FELLOW

## UNIVERSITI SAINS MALAYSIA

SECTION A

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PERSONAL PARTICULARS** | | | | |
| Full Name (write in CAPITAL LETTERS) | | | | |
| Permanent address:  *(Please give complete address)* | | | | Tel.:  Mobile Phone:  E-mail:  *(Compulsory)*  Fax: |
| Mailing address:  *(Please give complete address)* | | | |
| Date of birth: | | Age: | |
| \*Marital status: Single/Married | | Citizenship: | |
| NRIC/Passport no.:  *(Compulsory)* | | | |
| ACADEMIC QUALIFICATIONS*(Please enclose certified scroll and academic transcripts)* | | | | |
| **PARTICULARS** | **MASTER** | | **DOCTORATE** | |
| Name of certificate |  | |  | |
| Class/CGPA |  | |  | |
| Field |  | |  | |
| Year |  | |  | |
| Name and place of  Institution attended |  | |  | |
| **\*Is there any obligation contractual or otherwise with your sponsor? Yes/No**  *(Please indicate and enclose documentation evidence if any)* | | | | |
| **Title of Research Plan/Project:** | | | | |
| **Publications Track Record within the last 3 years*.***   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **No** | **Title of Publication**  **(author, title, journal, year, volume, pages)**  ***\*First Author only*** | **Status Paper** | **Index**  **(Web of Science / Scopus)** | **URL Publication**  ***(Journal Citation Report (JCR) for WoS)***  ***(SCImago Journal Rank (SJR) for Scopus)*** | **Ranking**  **(Q1 / Q2)** | **Impact Factor** | | 1. |  |  |  |  |  |  | | 2. |  |  |  |  |  |  | | 3. |  |  |  |  |  |  | | 4. |  |  |  |  |  |  | | 5. |  |  |  |  |  |  | | 6. |  |  |  |  |  |  |   ***Science Fields***  *Produced* ***three (3) publications*** *as the* ***First Author*** *in the* ***ISI Web of Science****; including at least* ***one (1) publication in Q1 / Q2 (based on JCR).***  ***Non-Science Fields***  *Produced* ***three (3) publications*** *as the* ***First Author*** *in* ***Scopus****; including at least* ***one (1) publication in Q1 / Q2 (based on SJR). Publication in the journal JCR is highly encouraged.***  ***OR***  *Minimum of* ***30 Cumulative Impact Factor (CIF)*** *within the* ***last 1 year.*** | | | | |
| **Have you ever been appointed as a Post-Doctoral Fellow at Universiti Sains Malaysia? If yes, please indicate:**  Date of Appointment: Date of Extension:  Name of Supervisor: School/ Center: | | | | |
| **APPLICANT’S DECLARATION** | | | | |
| **I affirm that all statements made by me on this form and all my accompanying documents below including my CV are correct. I understand that any inaccurate or false information or omission of material information will render this application invalid and that, if admitted and awarded a Post-Doctoral Fellow Appointment on the basis of such information, my appointment can be terminated. I understand if I fail to complete the form with related documents, the University have the rights to reject my application without prior notice.**  **Documents submitted (Compulsory) with application form:**   |  |  |  | | --- | --- | --- | | **List of Documents** | | **Please tick (√)** | | i. | Curriculum Vitae (CV) |  | | ii. | PhD certificate |  | | iii. | Publication Evidence (Publication front page, along with proof Journal Quartile) |  | | iv. | Recommendation/Supporting letter |  | | v. | Research experience (*if any*) |  | | vi. | Research Plan |  |     **Signature: Date:**  **Name:** | | | | |

**SECTION B**

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| SUPERVISOR’S PARTICULARS | |
| Name: | Title (Prof./Assoc. Prof./Dr.): |
| \*Status of position held: Permanent / Contract or others (please indicate)  ***Must be a permanent academic staff who has been confirmed in the position. (Applicable for USM Post-Doctoral Fellowship Funding)*** | |
| Office address: | Tel.:  Mobile Phone:  Fax:  E-mail: |
| **Have you had any Post-Doctoral Fellow throughout your service in the university? If yes, please indicate:**  Name of Post-Doctoral Fellow:  Date of Appointment:  Date of Extension: | |
| **Is there any possibility that you will retire / be on sabbatical leave / end your contract within your supervision period to this applicant? Yes/ No** | |
| RESEARCH INFORMATION | |
| 1. **Publications Track Record within the last 3 years*.***  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **No** | **Title of Publication**  **(author, title, journal, year, volume, pages)**  ***\**** ***First Author / Corresponding Author*** | **Status Paper** | **Index**  **(Web of Science / Scopus)** | **URL Publication**  ***(Journal Citation Report (JCR) for WoS)***  ***(SCImago Journal Rank (SJR) for Scopus)*** | **Ranking**  **(Q1 / Q2)** | | 1. |  |  |  |  |  | | 2. |  |  |  |  |  | | 3. |  |  |  |  |  | | 4. |  |  |  |  |  | | 5. |  |  |  |  |  | | 6. |  |  |  |  |  |   ***Science Fields***  *Produced* ***three (3) publications*** *as the* ***First Author/ Corresponding Author*** *in the* ***ISI Web of Science****; including at least* ***one (1) publication in Q1 / Q2 (based on JCR).***  ***Non-Science Fields***  *Produced* ***three (3) publications*** *as the* ***First Author*** *in* ***Scopus****; including at least* ***one (1) publication in Q1 / Q2 (based on SJR). Publication in the journal JCR is highly encouraged.*** | |
| 1. **List of active research grants/ projects – (Please enclose documentation evidence)**  |  |  |  | | --- | --- | --- | |  | **Name/Type of Research Grants/Projects as Project Leader (Primary Investigator)** | **Date/Duration (Start – End)** | | a. |  |  | | b. |  |  | | c. |  |  | | d. |  |  |   **Please indicate whether if there are no Grants/Projects available, will it affect the research development?**  **Yes/ No** | |
| 1. **Please indicate the number of Post-Doctoral Fellow and graduate students (Master/ Doctorate) where you are the main supervisor and enclose documentation evidence**  |  |  |  |  | | --- | --- | --- | --- | | **GRADUATED** | | **NAME** | **YEAR GRADUATED** | | a. | Doctorate |  |  | | Master |  |  | | **UNDER SUPERVISION** | | **NAME** | **YEAR OF ENROLMENT** | | b. | Doctorate |  |  | | Master |  |  | | Post-Doctoral Fellow |  |  | | Post-Doctoral Fellow (TWAS) |  |  | | |
| **FINANCIAL INFORMATION** | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Source of Funding**  **(Tick (√)** | | **Account Number** | **Duration of Appointment** | | **Honorarium/Salary**  **Monthly Rate (RM)** | **Total Budget (RM)** | | **Start** | **End** | | USM Post-Doctoral Fellowship Funding |  | JPNP.AUPE002 |  |  | 5,500.00 |  | | School Allocation (Enterprise, etc.) |  |  |  |  |  |  | | External Funding (Scholarship, Sponsorship, Research Grant, etc.) |  |  |  |  |  |  | | Without Funding |  |  |  |  |  |  |   \*Please state the source of funding and indicate the account number (if any). | |
| SUPERVISOR ’S DECLARATION | |
| I declare that all the above statements are correct. Signature: Date:  Name: | |

**SECTION C**

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| **TO BE COMPLETED BY SCHOOL/ CENTER ADMINSTRATION OFFICER** |
| **Financial Implication Please tick (√):**   |  |  | | --- | --- | | USM Post-Doctoral Fellowship Funding |  | | School Allocation (Enterprise etc.) |  | | External Funding (Scholarship, Sponsorship, Research Grant etc.) |  | | Without Funding |  |  |  |  |  | | --- | --- | --- | | **Duration of Appointment**  **(year/ months)** | **Honorarium/Salary x no. of months**  **(RM)** | **Total Approx. Budget**  **(RM)** | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Applicable for School only:**  This application has been evaluated and endorsed by the Selection Committee and we hereby declare that the publication information (including indexing in WoS/ Scopus and Quartile) by the candidate and supervisor is correct. Any inaccuracy will result to all application by the PTJ being rejected by the Division of Research & Innovation. This application is:  Please tick [ √ ]:   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Recommended** |  |  | **Not Recommended** |  | |   Remarks:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **(Officer In-Charge of Human Resource) Date:**  ***Signature and Official Stamp*** |
| **DEAN/ DIRECTOR’S ACKNOWLEDGEMENT** |
| The application meets the requirements and criteria of the Post-Doctoral Fellow and all accompanying documents have been verified.  General Comment:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **(Dean/ Director) Date:**  ***Signature and Official Stamp*** |