**REAPPOINTMENT / OUTPUT REPORT**

POST-DOCTORAL FELLOW

UNIVERSITI SAINS MALAYSIA

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| --- |
| 1. **REAPPOINTMENT**

(Please fill up Section A & B)***TO BE SUBMITTED 3 MONTHS BEFORE EXPIRY DATE*** |
| 1. **OUTPUT REPORT**

(Please fill up Section A)***TO BE SUBMITTED EVERY 6 MONTHS*** |

**NAME OF POST DOCTORAL FELLOW :**

**NAME OF SUPERVISOR :**

**SCHOOL/CENTRE :**

**DATE OF FIRST APPOINTMENT :**

**DATE OF SECOND APPOINTMENT :**

**PROJECT TITLE :**

SCIENCE

**FIELD :**

**SECTION A**

NON-SCIENCE

***Science Fields***

*Produced* ***two (2) publications*** *in the* ***ISI Web of Science*** *as the* ***First Author*** *in* ***Q1 / Q2******(based on JCR)****.*

***Non-Science Fields***

*Produced* ***two (2) publications*** *in the* ***Scopus*** *as the* ***First Author*** *in* ***Q1 / Q2******(based on SJR)****.* ***Publication in the journal JCR is highly encouraged.***

1. List of publications in citations-indexed journal (*ISI Web of Science/Scopus*).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **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)** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |
| 6. |  |  |  |  |  |

1. Other publications (e.g. books, chapter in books, proceedings, etc.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No** | **Title of Publication****(author, title, journal, year, volume, pages)*****\*First Author only*** | **Status Paper** | **Index** | **URL Publication** | **Ranking****(Q1 / Q2)** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

3. Other research outputs (e.g. products, patent, networking, etc.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No** | **Title of Publication****(author, title, journal, year, volume, pages)*****\*First Author only*** | **Status Paper** | **Index** | **URL Publication** | **Ranking****(Q1 / Q2)** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

***\* Please provide proof of journal quartile together with publication evidence****.*

Supervisor’s comment on Output Report:

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| --- |
| Post Doctoral Fellow’s overall rating for the following: |
| 1. Diligence
 |  | 1. Attendance
 |  |  |
|  |
| 1. Interest
 |  | 1. Work Quality and Efficiency
 |  |  |
|  |
| 1. English Proficiency:
 |  |  |
| 1. Written
 |  |  (ii) Oral |  |  |
|  |
| 1. Ability to work Independently
 |  | 1. Overall Performance
 |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **A Excellent** | **B Very Good** | **C Good** | **D Satisfactory** |
| **E Average** | **F Unsatisfactory** | **G Poor** |

**SUPERVISOR ’S DECLARATION**

I declare that all the above statements are correct.

***Signature and Official Stamp*  Date:**

**SECTION B**

**REQUEST FOR REAPPOINTMENT**

Supervisor’s justification for Reappointment:

**TO BE COMPLETED BY SCHOOL/ CENTER ADMINSTRATION OFFICER**

**Financial Implication Please tick (Ö):**

|  |  |
| --- | --- |
| USM Post-Doctoral Fellowship Funding |  |
| School Allocation (Enterprise etc.) |  |
| External Funding (Scholarship, Sponsorship, Research Grant etc.) |  |
| Without Funding |  |
|  |  |
| **Duration of Appointment****(year/ months)** | **Honorarium 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 [ Ö ]:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Recommended** |  |  | **Not Recommended** |  |

 |

**OFFICER IN-CHARGE OF HUMAN RESOURCE**

Remarks:

***Signature and Official Stamp* Date: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:

***Signature and Official Stamp* Date:**

**SECTION C**

**APPROVAL BY DEPUTY VICE CHANCELLOR (RESEARCH AND INNOVATION)**

***Signature and Official Stamp* Date:**