



Borang Permohonan Dan Kelulusan Pindaan Agihan Peruntukan
(Pejabat Kluster)

Butir-Butir

A	Nama Pemohon :			
	Jabatan :			
	Akademi / Fakulti / Institut / Pusat :			
	No. Tel. Pejabat :	No. H/p :	No. Faks :	
	Baki keseluruhan peruntukan: RM			
	Pindaan Agihan Peruntukan :			
	Vot	Pecahan	Kelulusan Asal (RM)	Pindaan Baru (RM)
	Vot 11000	Gaji & Upahan		
	Vot 14000	Elaun Lebih Masa		
	Vot 21000	Perjalanan & Sara Hidup		
	Vot 23000	Perhubungan Utiliti		
	Vot 24000	Sewaan		
	Vot 26000	Bekalan & Pembaikan		
	Vot 27000	Bekalan & Bahan Penyelidikan		
	Vot 28000	Penyelenggaraan & Pembaikan Kecil		
Vot 29000	Perkhidmatan Iktisas & Lain-lain			
Vot 35000	Peralatan			
Jumlah				
Justifikasi:				
Tandatangan:		Tarikh:		

Ulasan dan Perakuan

B Ketua Jabatan / Dekan / Pengarah / Ketua Pusat

- *Sokong
 *Tidak disokong

Tandatangan : _____

Tarikh :

Cop :

Untuk kegunaan Pejabat Kluster

C Merujuk kepada perkara di atas, dimaklumkan bahawa permohonan tuan / puan adalah:

- i. Diluluskan.
 ii. Tidak diluluskan kerana :
 a) Baki geran tidak mencukupi
 b) Tidak disokong oleh Ketua Jabatan / Dekan / Pengarah / Ketua Pusat
 c) Lain-lain : _____

Yang benar,

Pengerusi Kluster

Tarikh:

Cop :



Application and Approval Form for Research Grant Allocation Transfer
(Cluster Office)

Details

A Name of Applicant : _____
 Department : _____
 Academy / Faculty / Institute / Centre : _____
 Tel. No: Office : _____ Mobile : _____ Fax : _____
 Balance of Total Account : RM _____
 Research Grant Allocation Transfer :

Vote	Allocation	Received (RM)	Revised (RM)
Vot 11000	Salary and Wages		
Vot 14000	Overtime		
Vot 21000	Travelling Expenses and Subsistence		
Vot 23000	Communication and Utilities		
Vot 24000	Rental		
Vot 26000	Raw Materials for Repair and Maintenance		
Vot 27000	Research Materials and Consumables		
Vot 28000	Maintenance and Minor Repair and Services		
Vot 29000	Professional Services and Other Services		
Vot 35000	Equipment		
Total			

Justification:

Signature : _____ Date : _____

Comment and Endorsement

B Head of Department / Dean / Director / Centre

*Recommended
 *Not Recommended

Signature : _____
 Date : _____
 Stamp : _____

Official Use of Cluster Office

C Regarding the matter above, we would like to inform you that your application has been :

iii. Approved
 iv. Rejected due to :
 d) Lack of sufficient grant
 e) Not being approved by Head of Department/ Dean / Director / Centre
 f) Others : _____

Yours sincerely,

Cluster Chair _____ Date : _____
 Stamp : _____



* Please choose one