**LAMPIRAN A**

**IPT PENERAJU :**

**BIDANG TUJAHAN :**

**URUS SETIA MyLAB**

**BAHAGIAN PERANCANGAN KECEMERLANGAN IPT (BPKI)**

**JABATAN PENDIDIKAN TINGGI**

**KEMENTERIAN PENDIDIKAN MALAYSIA**

**ARAS 7, NO.2, MENARA 2**

**JALAN P5/6, PRESINT 5**

**62200 PUTRAJAYA**

**NO.TEL. : +603 – 8870 6952 / 6954 / 6956 /8870 6000 samb. 4579**

**NO. FAKS: +603 – 8870 6867**

[***mylabbpki@mohe.gov.my***](mailto:mylabbpki@mohe.gov.my)

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BORANG

PERMOHONAN PROJEK *MALAYSIA LABORATORIES FOR ACADEMIA-BUSINESS COLLABORATION*

(MyLAB) 1/2018

**(Pindaan Tahun 2018)**

|  |  |
| --- | --- |
| C:\Users\nadheerah\Desktop\LETTERHEAD & LOGO\LOGO KPM-01 (5).pngC:\Users\MoHE\Desktop\logoMyLAB04.jpgC:\Users\MOE\Desktop\LETTERHEAD & LOGO KPT\JPT_LOGO_PNG.png  **SEKSYEN A : MAKLUMAT UMUM PROJEK**  *[Incomplete Form will be rejected]* | |
| **A.** | **Tajuk Projek Yang Dicadangkan:**  *Title of Proposed Project:* |
|  |  |
| **B.** | **Maklumat Permohonan** */ Details of Application* : |
| **(i)** | Nama Ketua Projek: No. Kad Pengenalan/ Pasport:  *Name of Project Leader: IC / Passport Number*: |
| **(ii)** | **Jawatan (Sila tanda (√ )):**  *Position (Please tick ( √ )):*      **Profesor** **Prof. Madya /P. Kanan Pensyarah** **Lain-lain: Nyatakan \_\_\_\_\_\_\_\_**  *Professor*  *Assoc. Prof. / Sen. Lect**Lecturer* *Others: Specify* |
| **(iii)** | **Fakulti/Jabatan/Pusat/Unit (Sila nyatakan alamat penuh):**  *Faculty/School/Centre/Unit (Please provide full address):* |
| **(iv)** | **No. Telefon Pejabat: No. Telefon Bimbit:**  *Office Telephone No.: Handphone No.:* |
| **(v)** | **Alamat e-mel:**  *E-mail Address***:** |
| **(vi)** | **Nama dan alamat industri:**  *Industry name and address:* |
| **(vii)** | **Nama universiti kolaborasi:**  *University collaboration name:* |
| **(viii)** | **Tempoh masa projek ini (Maksimum 24 bulan):**  *Duration of project (Maximum 24 months):*  ***Tempoh* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Duration*  : |
| **(ix)** | **Jumlah peruntukan yang dipohon:**  *Amount applied:* |