# BORANG PERMOHONAN PROGRAM KOMUNITI (TIER 2) UNIVERSITI MALAYA

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| C:\Users\azizi.bkr\OneDrive - Universiti Malaya\Documents\MISC\Logo UM-06.png | | **UNIVERSITI MALAYA COMMUNITY PROGRAM**  **APPLICATION FORM (TIER 2)**  **PROGRAM CITRA AKADEMIK UNTUK KOMUNITI DAN ALAM (CAKnA)** |
| *One (1) softcopy of this form in word and one (1) in pdf format must be submitted to UMCares email:*  *Satu(1) salinan dalam format word dan satu (1) salinan dalam format pdf hendaklah dihantar ke emel UMCares:*  [umcares@um.edu.my](mailto:umcares@um.edu.my) *cc:* [asyraf90@um.edu.my](mailto:asyraf90@um.edu.my)  ***[Please note that INCOMPLETE FORM will not be processed]***  *[Borang yang TIDAK LENGKAP tidak akan diproses]* | | |
| **A** | **GRANT INFORMATION /** *MAKLUMAT GERAN* | |
| **A (1)** | **TITLE OF PROPOSED PROJECT:**  *Tajuk projek yang dicadangkan:* | |
| **B** | **DETAILS OF APPLICANT** / *MAKLUMAT PEMOHON* | |
| **B (1)** | Name of Project Leader:  *Nama Ketua Projek*:  Staff ID:  *No.Pengenalan Staf:* | |
| **B (2)** | **Position (Please tick** *( √ )***):**  *Jawatan (Sila tanda ( √ )*):  **Professor Associate Professor Senior Lecturer Lecturer**  Profesor *Profesor Madya Pensyarah Kanan Pensyarah* | |
| **B (3)** | **Faculty / Department / Centre / Unit (Please provide full address):**  *Fakulti / Jabatan / Pusat / Unit (Sila nyatakan alamat penuh):* | |
| **B (4)** | **Office Telephone No.:**  *No. Telefon Pejabat:*  **Handphone No.:**  *No. Telefon Bimbit:* | |
| **B (5)** | **E-mail Address:**  *Alamat e-mel:* | |
| **B (6)** | **Type of Service (Please tick** *( √ )***):**  *Jenis Perkhidmatan (Sila tanda ( √ )):*  **Permanent Contract (State contract expiry date):**  *Tetap Kontrak (Nyatakan tarikh tamat kontrak)* | |

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| **B (7)** | **Academic co-researcher (Please include with a curriculum vitae for each co-researcher)**  *Penyelidik bersama (Sila lampirkan vitae kurikulum bagi setiap penyelidik bersama)* | | | | | |
| **Bil** | **Name & IC / Passport Number**  *Nama & No. Kad Pengenalan/ Pasport* | | **University/Faculty/ Centre/ Unit**  *Universiti/Fakulti/ Pusat/Unit* | | **Contribution of Expertise/**  *Sumbangan Kepakaran* |
| 1 |  | |  | |  |
| 2 |  | |  | |  |
| 3 |  | |  | |  |
| 4 |  | |  | |  |
| 5 |  | |  | |  |
| **B (8)** | **Project Members (UM staff & students)**  *Ahli project (staf & pelajar)* | | | | | |
| **Bil** | **Name**  *Nama* | **Matric Number / Staff Number**  *Nombor metrik / Nombor staf* | | **Responsibility Center**  *Pusat Tanggungjawab (PTj)* | |
| 1 |  |  | |  | |
| 2 |  |  | |  | |
| 3 |  |  | |  | |
| 4 |  |  | |  | |
| 5 |  |  | |  | |
| **C** | **PROJECT INFORMATION /** MAKLUMAT PROJEK | | | | | |
| **C (1)** | **Sustainability Development Goals [Please tick** *(√)]:*  *Matlamat Pembangunan Lestari [Sila tanda (√)]:*  SDG 1 SDG 2 SDG 3  No poverty Zero Hunger Good Health & Well-Being  SDG 4 SDG 5 SDG 6  Quality Education Gender Equality Clean Water & Sanitation  SDG 7 SDG 8 SDG 9  Affordable & Clean Energy Decent Work & Industry, Innovation &  Economic Growth Infrastructure  SDG 10 SDG 11 SDG 12  Reduced Inequalities Sustainable Cities & Responsible Consumption &  Communities Production  SDG 13 SDG 14 SDG 15  Climate Action Life Below Water Life on Land  SDG 16 SDG 17  Peace, Justice & Partnership for the Goals Strong Institutions | | | | | |

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| **C (2)** | **Program Pillars [Please tick** *( √ )****]****:*  *Bidang Utama program [Sila tanda (√ ) ]:*  Financial & Economy Environmental Sustainability  *(Kewangan & Ekonomi) (Kelestarian Alam Sekitar*)  Quality Education Health & Wellbeing  *(Pendidikan Berkualiti) (Kesihatan & Kesejahteraan* | | | | | | |
| **C (3)** | **Program Status [Please tick** *( √ )****]****:***:**  *Status program [Sila tanda (√ )]:*  Modification of previous program/ initiative  *(Penambahbaikan program/ inisiatif terdahulu)*  New Extension of previous program/ initiative  *(Baharu) (Lanjutan program/ inisiatif terdahulu)* | | | | | | |
| **C (4)** | **List of community that will be benefited from the project**  *Nyatakan komuniti yang menerima manfaat daripada projek ini* | | | | | | |
| **NO** | **Name of Benefited Communities**  *Nama Komuniti yang*  *menerima manfaat* | **Location of Projects**  *Tempat projek dijalankan* | | | **Number of the Beneficiary**  *Bilangan penerima manfaat* | |
| 1. |  |  | | |  | |
| 2. |  |  | | |  | |
| **C (5)** | **Parliament constituency and Parliament Member**  *Kawasan Parlimen dan Ahli Parlimen* | | | | | | |
| **C (6)** | **Problem Statement, Related References, Relevance to Government Policy (if any)**.  *Pernyataan Masalah, Rujukan Berkaitan dan Perkaitan dengan Dasar Kerajaan (jika berkenaan), kenyataan hipotesis / persoalan penyelidikan dan kajian literatur*. | | | | | | |
| **C (7)** | **Brief Description of Knowledge / Technology / Skills Transfer to Community**  *Penerangan Ringkas mengenai pemindahan Pengetahuan / Teknologi / Kemahiran kepada komuniti* | | | | | | |
| **C (8)** | **The activities that will be executed**  *Aktiviti yang akan dilaksanakan* | | | | | | |
| **No** | **Objective(s) of the Program**  *Objektif Projek* | **Social Innovation Activities Name / Activities**  *Nama Aktiviti Inovasi Sosial /*  *Aktiviti* | | **Expected Results / Output from project** *Jangkaan Hasil / Output daripada projek* | | **Expected Outcome / Impact from project** *Jangkaan Outcome / Impak daripada projek* |
| **1.** |  |  | |  | |  |
| **2.** |  |  | |  | |  |
| **3.** |  |  | |  | |  |
| **4.** |  |  | |  | |  |
| **C (9)** | **Project Risk (Explain project risk in terms of time, technical and financial)**  *Risiko Projek (Terangkan risiko projek dari aspek masa, teknikal dan kewangan)* | | | | | | |
| **C (10)** | **Project Sustainability and Exit Plan (Please specify how the project will be managed after the project ends**  *Kelestarian Projek dan Exit Plan (Sila nyatakan bagaimana projek akan diuruskan selepas projek tamat)* | | | | | | |
| **D** | **BUDGET***/ BELANJAWAN* | | | | | | |
| **Please provide the breakdown of votes from funds that had been given by UMCares**  *Sila berikan pecahan vot daripada dana yang telah diberikan oleh UMCares* | | | | | | | |
|  | **Budget details**  *Butiran belanjawan* | | | **Amount requested (RM)**  *Jumlah yang dipohon (RM)* | | **Please specify**  *Sila nyatakan secara lengkap dengan pecahannya sekali.* | |
| **D(1)** | **Vote 11000 -**  **Salary and** **wages**  *Upah dan Elaun*  Untuk Pembantu Penyelidik (RA) | | |  | |  | |
| **D(2)** | **Vote 21000 -**  **Travelling and Transportation**  *Perjalanan dan Pengangkutan* | | |  | |  | |
| **D(3)** | **Vote 24000 -**  **Rental**  *Sewaan* | | |  | |  | |
| **D(4)** | **Vote 27000 -**  **Research Materials & Supplies**  *Bekalan dan Bahan Penyelidikan* | | |  | |  | |
| **D(5)** | **Vote 29000 -**  **Professional Services**  *Perkhidmatan Ikhtisas* | | |  | |  | |
| **TOTAL AMOUNT (RM)**  *JUMLAH BESAR (RM)* | | | |  | |  | |
| **E** | **DECLARATION BY APPLICANT /** *AKUAN PEMOHON*  **(Please tick *( √ )*) /** *(Sila tanda ( √ ))* | | | | | | |
|  | **I hereby declare that:**  *Saya dengan ini mengaku bahawa:*   1. **All information stated here is accurate, UMCares has the right to reject or to cancel the offer without prior notice if there is any inaccurate information given.**   *Semua maklumat yang diisi adalah benar, UMCares berhak menolak permohonan atau membatalkan tawaran pada bila-bila masa sekiranya keterangan yang dikemukakan adalah tidak benar.*   1. **I agree to amend the project proposal as suggested by UMCares if the application is approved.**   *Saya bersetuju untuk meminda kertas cadangan ini seperti yang disarankan oleh UMCares sekiranya permohonan diluluskan.*  **Please ensure all required information are provided** */ Sila pastikan semua maklumat ini disempurnakan*  **Title in English and Bahasa Malaysia Details of Community**  *Tajuk dalam Dwibahasa Maklumat Komuniti*  **Details of Collaborators / Stakeholders Details of Parliamentary Community Representative**  *Maklumat Rakan Kolaborasi / Pemegang Taruh Maklumat Wakil Parlimen*  **Related Attachments (if applicable)**  *Lampiran Berkaitan (sekiranya ada)*  **Date** ........................................ **Signature & Stamp** ........................................  *Tarikh Tandatangan & Cop* | | | | | | |
| **F** | **RECOMMENDATION BY DEAN/ RELEVANT DEPUTY DEAN**  *SOKONGAN OLEH DEKAN/ TIMBALAN DEKAN YANG BERKENAAN* | | | | | | |
|  | **Please tick ( √ ) and Recommended:**  *Sila tandakan (√) dan Diperakukan:*   1. **Recommended**   *Disokong*   1. **Not Recommended (Please specify reason)**   *Tidak Disokong (Sila nyatakan sebab)*  **Comments:**  *Ulasan:*  *…………………………………………………………………………………………………………………………………….*  *…………………………………………………………………………………………………………………………………….*  *…………………………………………………………………………………………………………………………………….*  **Name:** ................................................................................... **Signature & Stamp:** ........................................  *Nama Tandatangan & Cop*  **Date:** ........................................  *Tarikh* | | | | | | |

**LAMPIRAN 1**

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| **DETAILS OF COMMUNITY**  ***MAKLUMAT KOMUNITI*** | |
| **SECTION A**  Seksyen A | |
| **NAME OF COMMUNITY**  *Nama komuniti* |  |
| **FULL ADDRESS**  *Alamat penuh* |  |
| **Parliamentary Constituency**  Kawasan parlimen |  |
| **Parliament Member’s Name**  Nama ahli parlimen |  |
| **COMMUNITY REPRESENTATIVE CONTACT**  *Maklumat perhubungan wakil komuniti* | |
| **NAME**  *Nama* |  |
| **DESIGNATION**  *Jawatan* |  |
| **HANDPHONE NO.**  *No. telefon bimbit* |  |
| **EMAIL**  *Emel* |  |
| **SECTION B (Verification)**  Seksyen B (pengesahan) | |
| I hereby as a representative of the community confirm that all the information given is true and we hereby **AGREE** to carry out the knowledge / skills / technology transfer activities that will be carried out by Universiti Malaya to our community. Community information is as stated above.  *Dengan ini saya sebagai wakil komuniti mengesahkan semua maklumat yang diberikan adalah benar dan dengan ini kami* ***BERSETUJU*** *untuk menjalankan aktiviti pemindahan ilmu / kemahiran / teknolgi yang akan dijalankan oleh Universiti Malaya kepada komuniti kami. Maklumat komuniti adalah seperti tertera di atas.*  ………………………………… (**Signature** / Tandatangan)  **Name:** ......................................  *Nama:*  **Position:** ..................................  *Jawatan:*  **Official stamp:**  *Cop rasmi:* | |

**LAMPIRAN 2**

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| **DETAILS OF COLLABORATOR**  ***MAKLUMAT RAKAN KOLABORASI*** | | | | |
| **SECTION A**  *Seksyen A* | | | | |
| **NAME OF COLLABORATOR (ORGANISATION)**  *Nama rakan kolaborasi (organisasi)* |  | | | |
| **TYPE OF COLLABORATOR (ORGANISATION)**  *Jenis kolaborator (organisasi)* |  | **Business**  *Perniagaan*  **(Example: Sdn. Bhd., Berhad, Enterprise)** |  | **Non-Business**  *Bukan Perniagaan*  **(Example: Koperasi, Sekolah, JKK)** |
| **COLLABORATOR REGISTRATION NO. /**  **VALIDATION DATE (if available)**  *No. pendaftaran kolaborator / Tempoh sah laku (jika ada)* | **Example for organisation no. registered with Ministry of Finance (MOF) and validation date:**  **XXX-XXXXXXXXXX / XX-XX-20XX – XX-XX-20XX** | | | |
| **AREA / TYPE OF ACTIVITY**  *Bidang / Jenis Aktiviti* |  | | | |
| **FULL ADDRESS**  *Alamat penuh* |  | | | |
| **AMOUNT OF MONETARY CONTRIBUTION TO**  **THE PROJECT (RM) (if available)**  *Jumlah sumbangan kewangan kepada projek (RM) (jika ada)* |  | | | |
| **CONTACT PERSON**  *Maklumat perhubungan* | | | | |
| **NAME**  *Nama* |  | | | |
| **DESIGNATION**  *Jawatan* |  | | | |
| **OFFICE TELEPHONE NO.**  *No. telefon pejabat* |  | | | |
| **HANDPHONE NO.**  *No. telefon bimbit* |  | | | |
| **EMAIL**  *Emel* |  | | | |
| **SECTION B**  *Seksyen B* | | | | |
| I hereby as a representative of the collaborator confirm that all the information given is true and I hereby **AGREE** to collaborate with Universiti Malaya for the community engagement program that stated in the **COMMUNITY PROGRAM (TIER 2) APPLICATION FORM**.  *Saya dengan ini sebagai wakil kolaborator mengesahkan bahawa semua maklumat yang diberikan adalah benar dan saya dengan ini* ***BERSETUJU*** *untuk bekerjasama dengan Universiti Malaya bagi program penglibatan masyarakat yang dinyatakan dalam* ***BORANG PERMOHONAN PROGRAM KOMUNITI (TIER 2)****.*  ………………………………… (**Signature** / Tandatangan)  **Name:** ......................................  *Nama:*  **Position:** ..................................  *Jawatan:*  **Official stamp:**  *Cop rasmi:* | | | | |

**LAMPIRAN 3**

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| **DETAILS OF PARLIAMENTARY REPRESENTATIVE**  ***MAKLUMAT WAKIL PARLIMEN*** | |
| **SECTION A**  *Seksyen A* | |
| **PARLIAMENTARY CONSTITUENCY**  Kawasan parlimen |  |
| **PARLIAMENT MEMBER’S NAME**  Nama ahli parlimen |  |
| **AREA / TYPE OF ACTIVITY**  *Bidang / Jenis Aktiviti* |  |
| **FULL ADDRESS**  *Alamat penuh* |  |
| **AMOUNT OF MONETARY/ IN-KIND CONTRIBUTION TO**  **THE PROJECT (RM) (if available)**  *Jumlah sumbangan kewangan/ bukan kewangan kepada projek (RM) (jika ada)* |  |
| **CONTACT PERSON**  *Maklumat perhubungan* | |
| **NAME**  *Nama* |  |
| **DESIGNATION**  *Jawatan* |  |
| **OFFICE TELEPHONE NO.**  *No. telefon pejabat* |  |
| **HANDPHONE NO.**  *No. telefon bimbit* |  |
| **EMAIL**  *Emel* |  |
| **SECTION B**  *Seksyen B* | |
| As a Member of Parliament, I acknowledge the importance of community engagement in driving societal progress.  I hereby **AGREE**  to support the community engagement program as outlined in the **COMMUNITY PROGRAM (TIER 2) APPLICATION FORM**.  *Saya dengan ini sebagai wakil kolaborator mengesahkan bahawa semua maklumat yang diberikan adalah benar dan saya dengan ini* ***BERSETUJU*** *untuk bekerjasama dengan Universiti Malaya bagi program penglibatan masyarakat yang dinyatakan dalam* ***BORANG PERMOHONAN PROGRAM KOMUNITI (TIER 2)****.*  ………………………………… (**Signature** / Tandatangan)  **Name:** ......................................  *Nama:*  **Position:** ..................................  *Jawatan:*  **Official stamp:**  *Cop rasmi:* | |