

**CONFIDENTIAL**

Please fill in all information required in this form. Kindly indicate "Nil" in the appropriate column if you do not have any information to be declared.

**PERSONAL DETAILS:**

Name			
Staff No			
Designation			Job Grade
Faculty/Institute/Centre			
Department			
Telephone (Office)		Telephone (Mobile)	
Email			

**APPLICATION FOR PROMOTION TO : Please tick ( √ ) in the appropriate box.**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Senior Professor (A7)             | <input type="checkbox"/> Specialist V (A6)   | <input type="checkbox"/> Senior Lecturer (A3)          |
| <input type="checkbox"/> Clinical Senior Professor (A7)    | <input type="checkbox"/> Specialist IV (A5)  | <input type="checkbox"/> Clinical Senior Lecturer (A3) |
| <input type="checkbox"/> Professor (A6)                    | <input type="checkbox"/> Specialist III (A4) | <input type="checkbox"/> Lecturer (A2)                 |
| <input type="checkbox"/> Clinical Professor (A6)           | <input type="checkbox"/> Specialist II (A3)  | <input type="checkbox"/> Clinical Lecturer (A2)        |
| <input type="checkbox"/> Associate Professor (A5)          | <input type="checkbox"/> Specialist I (A2)   |  |
| <input type="checkbox"/> Clinical Associate Professor (A5) |  |  |
| <input type="checkbox"/> Assistant Professor (A4)          |  |  |
| <input type="checkbox"/> Clinical Assistant Professor (A4) |  |  |

Date of the appointment of current position/last promotion: \_\_\_\_\_

**EMPLOYMENT DETAILS:**

Date of appointment in UTAR:	
Date of appointment to present level:	

**ACADEMIC & PROFESSIONAL QUALIFICATIONS:****ACADEMIC QUALIFICATION**

Date Completed	Qualification	Institution
PROFESSIONAL QUALIFICATION*		
Date Admitted	Qualification	Professional Body

\*Professional qualification which is awarded by the professional body to practice in the profession.

<b>Universiti Tunku Abdul Rahman</b>			
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023	Page No: 2 of 16

## A. RESEARCH

### A1. Research Projects/Grants & Funding

**Note:** Please list research projects completed and in-progress. Highlight projects with international collaboration. If you are doing your postgraduate study by research, please provide details of research project as well. Please indicate with an asterisk mark (\*) next to "No." for those active projects that are new after your last promotion.

No	Title of Project	Details of Grants / Awarding Agency	Colleagues/ Collaborators involved	Role in Project (Team Leader/ Member)	Duration		Amount (RM)
					Start	End	

Please provide related supporting documents for the Research Projects/Funding

## B. PUBLICATIONS

### B1. Journal Publications

**Note:** All publications accepted/published are to be listed. Please indicate with an asterisk mark (\*) next to "No." for those publications that are new after your last promotion.

No.	Description of Paper (Author(s), Paper Title, Name of Journal /Vol./No./Pg. No., Year)	Name of Publisher, ISSN, International Journal/National Journal	Database in which Journal was listed	Role (Principle Author/ Co Author)	Quartile Ranking	Status of Paper

Please provide 1 set of journal papers as listed below:

Application for Senior Lecturer – submit 2 best full papers

Application for Associate Professor – submit 7 best full papers

Application for Professor – submit 15 best full papers

Application for Senior Professor – submit 25 best full papers

<b>Universiti Tunku Abdul Rahman</b> <b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b> Form Number : FM-DHR-TM-040      Rev No: 11      Effective Date: 13/06/2023      Page No: 3 of 16			
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023	Page No: 3 of 16

### B2. Conference Proceedings

No.	Description of Paper [Author(s), Paper Title, Name of Conference / Venue / Dates, Pg. No.]	Conference Database Listed	[Oral / Poster][Invited Paper/Refereed Paper/Abstract]	Role of Presentation [Keynote/ Session Chairman/ Presenter]

Please provide related supporting documents for the conference papers. Attach also the first page of papers presented/accepted.

### B3. Monograph/Book/Book Chapter

No.	Description of Monograph/Book/Book Chapter [Author(s), Title, Monograph/Book/Book Chapter, Editor(s), Publisher, Pg. No., Year]	Status of Publication

Please provide related supporting documents for the monographs/books/book chapters.

### B4. Academic & Professional Presentation (Oral/Talk/Poster/Artwork/Performance)

No.	Title of Paper/Artwork/Performance	Name of Conference/Event/Venue/Year	Organiser

Please provide related supporting documents for the presentation.

<b>Universiti Tunku Abdul Rahman</b>			
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : <b>FM-DHR-TM-040</b>	Rev No: 11	Effective Date: 13/06/2023	Page No: <b>4 of 16</b>

**B5. Intellectual Property (Patents/Trademarks/Industrial Designs/Copyrights)**

No.	Type of IP	Author(s) [according to author sequence, including yourself]	Date Filed/ Date Granted [Reference No]	Short Description

*Please provide related supporting documents for the IP.*

**B6. Creative Output/Other Publications**  
**(Newspaper/Article/Periodical/Magazine/Case Studies/Technical Reports/Policy Papers)**

No.	Description of Creative Output/Other Publication [Author(s), Publication Name, Name of Publisher, Issue/Vol./Series/Pg. No., Year]	Type of Publications/ Circulation	Remarks

*Please provide related supporting documents for the creative output/publication.*

**B7. Involvement in Research Centres at UTAR**

No.	Centre	Role	Remarks

*Please provide related supporting documents for the involvement in Research Centres at UTAR.*

<b>Universiti Tunku Abdul Rahman</b> <b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023	Page No: 5 of 16

### C. POSTGRADUATE SUPERVISION

#### C1. Supervision of Postgraduate Students

**Note:** If postgraduate student supervised is not a UTAR student, please provide a letter of appointment from the institution concerned as documentary evidence. Please indicate with an asterisk mark (\*) next to "No." for those ongoing student supervision that are new after your last promotion.

No	Name of Student	Title of Degree	Name of Institution	Duration		Role (Main Supervisor/ Co-Supervisor)	Status Of Student Progress (In Progress/ *Completed/ **Graduated)
				Start	Completed Date (if applicable)		

- Status of Student Progress - \* completed - submitted thesis, \*\* graduated - Senate's approval

### D. TEACHING AND UNDERGRADUATE SUPERVISION

#### D1. Teaching Duties

**Note:** Please indicate with an asterisk mark (\*) next to "No." for those teaching activities that are new after your last promotion.

No	Subject Taught / Subject Code	Semester	No of Students	Teaching Hours			Total Teaching Hours	Student Survey Score [L/T/P]
				Lecture (L)	Tutorial (T)	Practical (T)		

#### D2. Supervision of Undergraduate Students

No	Title of Project (academic year)	Involvement as Sole/ Main/ Co-supervisor	Names of Students

<b>Universiti Tunku Abdul Rahman</b>			
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023	Page No: 6 of 16

### D3. Development of E-Content Material

No	Description of E-Content Material Developed (topic/chapter and description, type of media files [doc/pdf/ppt/mp3/ avi/etc], WBLE location where file uploaded)	Unit Code and Title	Team members

### D4. Continuous Professional Development (CPD) Activities

No	Name of Programme/ Event / Activities	Organiser	No. of Hours	Date	Remarks

## E. CONSULTANCY/ EXTERNAL CLINICAL PRIVATE PRACTICE

### E1. Consultancy Projects (e.g. Contract Research, Consultancy, Training Courses) / External Clinical Private Practice

**Note:** Only consultancy work/clinical services completed or in-progress in UTAR are to be listed. Please indicate with an asterisk mark (\*) next to "No." for those consultancy work/clinical services that are new after your last promotion.

No	Name of Project / Client Details / Role in Project / Other Colleagues involved	Duration		Contribution		Amount Involved
		Start	End	Role	%	

Please provide related supporting documents for Consultancy Project/External Clinical Private Practice.

<b>Universiti Tunku Abdul Rahman</b>			
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023	Page No: 7 of 16

#### F. SERVICES TO UNIVERSITY, PROFESSION AND SOCIETY

**Note:** Please indicate with an asterisk mark (\*) next to “No.” for those services contributed that are new after your last promotion.

##### **F1. Service to the University/Faculty/Department**

No	Description of Role	Duration		Remarks (if any)
		From	To	

*Note : Only position held / administrative duties / contribution in committees /organizing of conferences / industry liaison and coordination work are to be listed.*

##### **F2. External Service to Profession/Discipline**

No	Name of Organization / Association / Journal / Conference / Committee	Role	Date / Duration

*Note: Please provide supporting document on appointment/positions held*

##### **F3. External Service To The Community/Society/Nation**

No	Name of Organization /Association	Role	Date / Duration

*Note: Please provide supporting document on appointment/positions held*

##### **F4. Professional Membership Qualification/Certification/Membership in Societies/Associations**

No	Name of Professional Body/Society/Association	Type of Membership	Membership No	Date/ Duration

*Note: Please provide supporting document on membership held*

<b>Universiti Tunku Abdul Rahman</b>			
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023	Page No: 8 of 16

### **G. HONOURS/AWARDS/RECOGNITION**

#### **G1. Honours/Awards/Recognition**

**Note:** Please indicate with an asterisk mark (\*) next to “No.” for those honours/awards/recognition that are new after your last promotion.

No	Name/Title of Award	Awarding/ Conferring Body	Value (If any)	Duration		Remarks (If any)
				From	To	

### **H. VALUE ADDED SERVICES AND IMPACT**

**Note:** Please state the value added services with significant impact/contribution to the University and society. Please indicate with an asterisk mark (\*) next to “No.” for those that are new after your last promotion. (Use separate sheet if necessary)

No	Activity Details	Results with Industrial/ Societal/ Internationalisation Impact

<b>Universiti Tunku Abdul Rahman</b> <b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b> Form Number : FM-DHR-TM-040      Rev No: 11      Effective Date: 13/06/2023      Page No: 9 of 16			
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### **I. STATEMENT**

- (1) Please describe your significant contributions and outputs in the following areas that justify for the consideration of promotion to the next level.

A	Research	
B	Publications	
C	Postgraduate Supervision	
D	Teaching and Undergraduate Supervision	
E	Consultancy / External Clinical Private Practice	
F	Service to University, Profession and Society	
G	Honours/ Awards/ Recognition	
H	Value Added Services and Impact	

- (2) If you were to be promoted to the next level, describe the targets that you plan to pursue in the following areas for your new position.

A	Research	
B	Publications	
C	Postgraduate Supervision	
D	Teaching and Undergraduate Supervision	
E	Consultancy / External Clinical Private Practice	
F	Service to University, Profession & Society	
G	Honours/Awards/ Recognition	
H	Value Added Services and Impact	

**REFEREES:**

*Kindly give details of referees. The candidate is advised to approach the referees for their consent and to provide the necessary information to facilitate the referees to write their reports. The referees should be from the same field of expertise of the candidate and should hold an academic position which is equivalent to the post applied.*

**Referee 1:**

Name	
Designation	
Institution	
Telephone (Office)	
Telephone (Mobile)	
Email	
Webpage	

Area/s of recent work and/or performance of the applicant of which the referee is familiar with:

  
  
  
**Referee 2:**

Name	
Designation	
Institution	
Telephone (Office)	
Telephone (Mobile)	
Email	
Webpage	

Area/s of recent work and/or performance of the applicant of which the referee is familiar with:

  
  
  
**Submission of Referee's Report:**

Please tick (✓) one of the options below:

Attached please find both referees' reports

My referees will be writing confidentially to DHR

(Applicant to ensure referees provide their reports to DHR before the closing date for Application for Promotion)

**DECLARATION:**

I hereby declare that the information provided in this application is true and correct.

Applicant Name	
Signature	
Date	

<b>Universiti Tunku Abdul Rahman</b>							
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>							
Form Number : FM-DHR-TM-040	Rev No: 11	Effective Date: 13/06/2023			Page No: 11 of 16		

### ASSESSMENT BY HEAD AND DEAN

Head and Dean to verify the information declared by the candidate and to do assessment on the candidate by indicating score points of 1-5 [1 being the lowest and 5 being the highest] and such score points would be multiplied by the weightage assigned according to post applied.

**Table 1: Weighting of Assessment According to Academic Position**

Position	Research	Publication	Postgraduate Supervision	Teaching & Undergraduate Supervision	Consultancy and External Clinical Private Practice	Service to University, Profession & Society	Total
Centre for Foundation Studies							
Lecturer/ Senior Lecturer	-	-	-	70%	-	30%	100%
Faculties/Institutes							
*Senior Lecturer	25%	20%	10%	30%	5%	10%	100%
*Associate Professor	20%	20%	20%	20%	10%	10%	100%
*Professor	20%	20%	20%	20%	10%	10%	100%
*Senior Professor	20%	20%	20%	20%	10%	10%	100%
Specialist Staff in Faculties/Institute							
Specialist II	20%	20%	5%	30%	15%	10%	100%
Specialist III	15%	20%	5%	30%	20%	10%	100%
Specialist IV	15%	20%	5%	30%	20%	10%	100%
Specialist V	15%	20%	5%	30%	20%	10%	100%

\*Including clinical academic staff

### REPORT FROM HEAD

Please provide your comments and evaluation for the applicant in the following areas with respect to his/her performance in the current position since last appointment/promotion.

Excellent	4.50 – 5.00	Outstanding performance exceeds all targets consistently with contributions of great impact to University, Nation and Society.
Exceeds Expectation	4.00 – 4.49	Performance meets all targets and 50% exceeding the targets with value added services.
Meets Expectation	3.00 – 3.99	Performance meets all targets set.
Needs Improvement	2.00 – 2.99	Performance meets some targets and can be improved.
Unacceptable	1.00 – 1.99	Performance is unsatisfactory.

**Universiti Tunku Abdul Rahman**

**Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF**

Form Number : **FM-DHR-TM-040**

Rev No: 11

Effective Date: **13/06/2023**

Page No: **12 of 16**

A. Research [quality research projects, role in projects, pioneering topics, funding application and project implementation, funding sources, research collaborations, Internationalization efforts, awards and recognition, initiative and efforts in research activities].

Comments:

Evaluation: [ ]

B. Publication [quality and impact of the published papers, role in publication, peer review, internationally recognized, awards, intellectual property and recognition, initiative and efforts in publication activities].

Comments:

Evaluation: [ ]

C. Postgraduate Supervision [active role in supervision, student progress and completion rate, awards and recognition in supervision, initiative and efforts in supervision activities].

Comments:

Evaluation: [ ]

D. Teaching & Undergraduate Supervision [active role in teaching and curriculum development, course preparation, innovative and effective teaching, teaching evaluation, successful student projects, passion in teaching, awards and recognition, initiative, development of e-content material, efforts in teaching activities and participation in Continuous Professional Development (CPD) activities].

Comments:

Evaluation: [ ]

E. Consultancy and External Clinical Private Practice [external project consultation and course delivery, clinical services, role in consultancy, funding sources, collaborations, local and international recognition, initiative and efforts in consultancy activities].

Comments:

Evaluation: [ ]

**Universiti Tunku Abdul Rahman**

**Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF**

Form Number : **FM-DHR-TM-040**

Rev No: 11

Effective Date: **13/06/2023**

Page No: **13 of 16**

F. Service to University, Profession and Society [active role in university administrative services, contributions in University-industry collaboration, proactive and value-added, contributions to the growth and development of university, contributions and impact to profession and society, internationalization efforts, awards and recognition, initiative and efforts in services to university, profession and society].

Comments:

Evaluation: [ ]

G. Value Added Services and Impact.

Comments:

Evaluation: [ ]

H. General Comments [adherence to University's code of ethics, policies, procedures, rules and regulations as well as team work spirit].

Comments:

Evaluation: [ ]

I. Recommendation. Please tick ( √ )

Recommended

Not recommended

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>Universiti Tunku Abdul Rahman</b>			
<b>Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF</b>			
Form Number : <b>FM-DHR-TM-040</b>	Rev No: 11	Effective Date: <b>13/06/2023</b>	Page No: <b>14 of 16</b>

### REPORT FROM DEAN/DIRECTOR

Please provide your comments and evaluation for the applicant in the following areas with respect to his/her performance in the current position since last appointment/promotion.

<b>Rating</b>	<b>Point Range</b>	<b>Description</b>
Excellent	4.50 – 5.00	Outstanding performance exceeds all targets consistently with contributions of great impact to University, Nation and Society.
Exceeds Expectation	4.00 – 4.49	Performance meets all targets and 50% exceeding the targets with value added services.
Meets Expectation	3.00 – 3.99	Performance meets all targets set.
Needs Improvement	2.00 – 2.99	Performance meets some targets and can be improved.
Unacceptable	1.00 – 1.99	Performance is unsatisfactory.

A. Research [quality research projects, role in projects, pioneering topics, funding application and project implementation, funding sources, research collaborations, internationalization efforts, awards and recognition, initiative and efforts in research activities].

Comments:

Evaluation: [ ]

B. Publication and Patent [quality and impact of the published papers, role in publication, peer review, internationally recognized, awards, intellectual property and recognition, initiative and efforts in publication activities].

Comments:

Evaluation: [ ]

C. Postgraduate Supervision [active role in supervision, student progress and completion rate, awards and recognition in supervision, initiative and efforts in supervision activities].

Comments:

Evaluation: [ ]

D. Teaching & Undergraduate Supervision [active role in teaching and curriculum development, course preparation, innovative and effective teaching, teaching evaluation, successful student projects, passion in teaching, awards and recognition, initiative, development of e-content material, efforts in teaching activities and participation in Continuous Professional Development activities].

Comments:

Evaluation: [ ]

**Universiti Tunku Abdul Rahman**

**Form Title : APPLICATION FOR PROMOTION – ACADEMIC STAFF**

Form Number : **FM-DHR-TM-040**

Rev No: 11

Effective Date: **13/06/2023**

Page No: **15 of 16**

E. Consultancy and External Clinical Private Practice [external project consultation and course delivery, clinical services, role in consultancy, funding sources, collaborations, local and international recognition, initiative and efforts in consultancy activities].

Comments:

Evaluation: [ ]

F. Services to University, Profession and Society [active role in university administrative services, contributions in University-industry collaboration, proactive and value-added, contributions to the growth and development of university, contributions and impact to profession and society, internationalization efforts, awards and recognition, initiative and efforts in services to university, profession and society].

Comments:

Evaluation: [ ]

G. Value Added Services and Impact.

Comments:

Evaluation: [ ]

H. General Comments [adherence to University's code of ethics, policies, procedures, rules and regulations as well as team work spirit].

Comments:

Evaluation: [ ]

I. Recommendation. Please tick ( ✓ )

Recommended

Not recommended

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Division of Human Resource Use :****Decision of the Appointment and Promotion Committee: Please tick ( √ )** Shortlisted for promotion interview NOT Shortlisted for promotion interview

Committee Meeting held on \_\_\_\_\_ MIN \_\_\_\_\_

Stamp Date of Form Received

**Decision of the Appointment and Promotion Committee: Please tick ( √ )** Promoted to the post of \_\_\_\_\_ Job Grade [ \_\_\_\_\_ ] NOT promoted

Committee Meeting held on \_\_\_\_\_ MIN \_\_\_\_\_