

FACULTY OF SCIENCE AND MATHEMATICS INTERDEPARTMENT CHARGE INSTRUCTION FORM

Ref. No. : _____ UNIT AKAUN, MIS DAN BAJET JABATAN BENDAHARI UNIVERSITI PENDIDIKAN SULTAN IDRIS Please charge to Department / Section / Faculty as below: Applicant Name Department Research Title Payment Cash : RM Grant : Current Balanced Grant Start Date : Expiry Date : **Duration of Grant DETAILS OF CHARGES:** Charge per Sample No. of Sample(s) No. Description Total (RM) (RM) Overall Total **APPLICANT DECLARATION COORDINATOR APPROVAL** I agreed that research grant as above is transferred to Akaun Amanah Sewaan Peralatan Makmal Sains, Fakulti Sains dan Matematik, 13-AF-65-B1-00-007. (I agreed to pay in cash if the grant balance is insufficient or has expired.) Cash (Signature & Stamp) (Signature & Stamp) FOR BURSARY OFFICE USE Transferred on _____ to Akaun Amanah Sewaan Peralatan Makmal Sains, Fakulti Sains dan Matematik, 13-AF-65-B1-00-007 Date: Assisstant Bursary Signature (Official Stamp)

ATTENTION: