UNIVERSITI TEKNOLOGI MARA

Institut Pengajian Siswazah

DANA SOKONGAN KONFERENSI

CONFERENCE SUPPORT FUND

APPLICATION REQUIREMENTS / INSTRUCTIONS

1. Please read the instructions in this form carefully before completing it. Failure to adhere to the eligibility requirements and application procedures could lead to the application being rejected.
2. Applicants must be enrolled as **FULLTIME** postgraduate students of Universiti Teknologi MARA.
3. Applicants must be UiTM postgraduate students with an active status and have not exceeded their period of study.
4. All applicants are required to submit their application **ONE MONTH** prior to the date of the conference at the latest with the following documents:
   i. Full paper ready for publication;
   ii. Proof of conference indexing (ISI/SCOPUS/WOS/MyCite);
   iii. Notification of acceptance of the paper; and
   iv. Details of conference (i.e., brochure with information on conference fees).
5. Application is subject to funding for presentation of a full paper in the form of a normal presentation and not using a poster presentation or virtual presentation.
6. Completed Application Form must be submitted to:
   Department of Academic Development, Resources & Students,
   Institute of Graduate Studies, UiTM
   Block 8, INTEKMA Convention Centre,
   Persiaran Raja Muda, Seksyen 7,
   40000 Shah Alam, Selangor, MALAYSIA

A. APPLICANT'S PARTICULARS

Name:

Student ID: **Programme Code:** **Semester:**

IC No. / Passport No.: **Contact Number:**

Current Address:

Postcode

E-mail:

Have you received IPSis Conference Support Fund in the past? **YES** ☐ **NO** ☐

Reference of IPSis Approval Letter (if applicable): .....

Main Supervisor:

Co-Supervisor:
(if applicable)

Research Title: .....

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B. CURRENT SCHOLARSHIPS/FINANCIAL ASSISTANCE/RESEARCH UNIVERSITY GRANT (*if any*)

Sponsor:

Type: **Scholarship / Loan / Scheme / Research / University Grant**

Amount: **R M . **

Duration: **From** / / 2 0 **To** / / 2 0

C. CONFERENCE INFORMATIONS

Name of Conference:

Organiser:

Venue of Conference:

Date of Conference: **From:** / / 20 **To:** / / 20

Registration Fee: RM .

Indexed Publication: YES ☐ NO ☐

Title of the Paper:

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D. DECLARATIONS

The information I have given in this application is true and correct.
I declare that I am not a full time worker at any organisation and do not receive any full scholarship.

Name:

Signature : **Date :** / / 20

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E. SUPERVISOR'S COMMENT *(To be filled by Main Supervisor)*

Name:

Faculty:

Supervisor's Recommendation:
(in terms of the quality of the paper and relevancy)

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Signature	**Date**	**Name and Official Stamp**

F. ENDORSEMENT BY HEAD OF POSTGRADUATE STUDIES FACULTY

☐ **Endorsed**

☐ **Not endorsed**

Comment: .....

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Signature	**Date**	**Name and Official Stamp**

FOR OFFICE USE ONLY

The Committee of the Meeting recommended the following decision on

(Date of committee meeting) | | | / | | | / | 2 | 0 | | |

Results		Comment
Accept	☐	
KIV	☐	
Reject	☐	