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| **Reference code:** |  |

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|  **UNIVERSITI MALAYA****CENTRE OF EXCELLENCE CATALYST GRANT (CoE-CG) APPLICATION FORM***One (1) copy of this form duly completed must be submitted to Level 7,* *The Research Cluster Office, Universiti Malaya**[Incomplete form will be rejected]* |
| **A** | **Please indicate your Centre of Excellence as below:** |
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| 1. | Artificial Intelligence and Emerging Technologies | ( ) | 10. | Halal Research, Training and Education  | ( ) |
| 2. | Innovative Medical Devices  | ( ) | 11. | Smart Mobility  | ( ) |
| 3. | Value Creation    | ( ) | 12. | Aerospace Innovation  | ( ) |
| 4. | Micro, Small and Medium Enterprise  | ( ) | 13. | Rare Earth Elements  | ( ) |
| 5. | Climate Preparedness and Community Resilience  | ( ) | 14. | Natural Products, Biopharmaceuticals and Precision Medicine    | ( ) |
| 6. | Environmental, Social & Governance (ESG)  | ( ) | 15. | Future Sustainable Energy  | ( ) |
| 7. | Food Security & Intelligent Farming  | ( ) | 16. | Biodiversity for Sustainable Economy  | ( ) |
| 8. | Urban Ecosystem, Culture and Heritage  | ( ) | 17. | Quantum Information Science and Technology  | ( ) |
| 9. | Future Studies  | ( ) | 18. | Digital Transformation of Health  | ( ) |

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| **B** | **DETAILS OF RESEARCHER** **(Head of CoE / Members of CoE)\*** |
|  **(i)** | Name of applicant: IC / Passport Number: |
|  **(ii)** | **Position (Please tick** *( √ )***):**  **Professor**  **Assoc. Prof. Senior Lecturer** **Lecturer**   |
|  **(iii)** |  **Faculty/Department/Centre/Unit (Please provide full address):** |
|  **(iv)** | **Contact details:****Office Telephone No.:** **Handphone No.:** **E-mail Address:**  |
|  **(v)** | **Type of Service (Please tick** *( √ )***):**  **Permanent Contract (State contract expiry date**): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  **(vi)** | **Date of first appointment with the University of Malaya:**  |

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|  **(vii)** |  **Co-Researchers: (Must include at least 3 members from the CoE)***(Please attach CV for each researcher and include a list of publication for the last five (5) years)* |
| **No.** | **Name** | **IC / Passport Number:** | **Institution** | **Academic Qualification/****Designation** | **Signature**   |
| **Name of Other Researchers** (if applicable) |
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|  **(viii)** | **Name of External Collaborator(s)** |
| **No.** | **Name** | **Institution** | **Academic Qualification/****Designation** | **Signature**   |
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| **C** | **THE EXTERNAL RESEARCH GRANT INFORMATION**  |
| **(i)** | **Title:**  |
| **(ii)** | **Executive summary (300 words)** |
| **(iii)** | **Please explain how the external research grant aligns with the CoE’s niche area in the CoE-CG application.** |
| **(iv)** | **Justification for CoE-CG application: (Explain how the application related with the external research grants)** |
| **(v)** |  **Location of Research:** |
| **(vi)** | **Duration of research (as stated in the contract between the two parties):**  **Duration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **From :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **To :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **(vii)** | **Research projects that have been completed or ongoing by the University of Malaya Principle Investigator for the last three years.**  |
| **Title of Research** | **Grant’s Name** | **Position / Role** | **Total Allocation** | **Start Date** | **End Date** |
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| **E** | **CENTRE OF EXCELLENCE CATALYST GRANT INFORMATION**  |
| **(i)** | **Project title:**  |
|  **(i)** | **Executive Summary of Project Proposal (maximum 300 words)** **(Please include the background of research, literature reviews, objectives, research methodology and expected outcoes from the research project)** |
|  **(iii)** | **Detailed proposal:****(****a) Research background including Problem Statement, Related References, Relevance to Government Policy (if any), Hypothesis /Research Questions and Literature Reviews**.  **(b) Research Objective (s)****Example*****This stufy embarks on the following objectives:***1. *To inverstigate .......*
2. *To assess .........*
3. *To investigate .....*
4. *To make recommendation based on ...........*

 **(c)Methodology** **Please state in the form**1. **Description of Methodology**
2. **Flow Chart of Research Activities (Please enclose in the Appendix)**
3. **Gantt Chart of Research Activities (Please enclose in the Appendix)**
4. **Milestones and Dates (Please enclose in the Appendix)**

**(d) Expected Results/Output**1. **Novel theories/New findings/Knowledge**
2. **Research Publications Q1/Q2 WOS-indexed journal articles**
3. **MoA / LoA**
4. **Intellectual Property**

**(e) Outcome / Impact (please delineate/describe expected research deliverables on Society, Academia, Government, Industry and Environment)**1. Impact on Academics, Society, Industry, Economy and Nation
 |
| **F** | **ACCESS TO EQUIPMENT AND MATERIAL** |
| **(i)** | **Equipment**  | **Location** |
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| **G** | **BUDGET** |
|  | **Please indicate your estimated budget for this research and details of expenditure according to the guidelines attached.** |
| **Budget details***(Please specify fractions for each category)* | **External National / Private / Industry / Internatioinal Funding** | **CoE-CG** | **Amount approved by Dep.VC (R&I)/ Coordinator of Research Cluster** |
| **Amount Received** **& Details** **Project No:**   | **Amount Request** | **Justification** |
|  **(i)** | **Vote 11000 - Salary and** **wages for Research Assistant** * *Wages and Allowances for Temporary and Contract Personnel who are directly engaged by the project.*
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|  **(ii)** | **Vote 21000 - Travelling and Transportation*** *A maximum of* ***one*** *overseas visit/conference is allowed throghout the duration of the project.*
* *Only the project leader or senior co-researcher is allowed for overseas trip*
* *Travel is limited to economy class and as far as possible using the shortest direct routes.*
* *No virement of funds are allowed from other categories.*
* *Not more than 25% of grant (including local travel)*
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|  **(iii)** | **Vote 24000 - Rental*** *Rental expenses for building space, equipment, transportation and any other item directly related to the project.*
* *Renovation of laboratory/office spaces is not allowed.*
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|  **(iv)** | **Vote 27000 - Research Materials & Supplies** * *Only expenses for research materials and supplies directly related to the project should be included.*
 |  |  |  |  |
|  **(v)** | **Vote 28000 - Maintenance and Minor Repair Services*** *Only expenses for minor modifications and repairs of the equipment or any other item directly related to the project.*
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|  **(vi)** | **Vote 29000 - Special Services*** *Includes expenses for special services directly related to the project (such as consultancy, payment for enumerators, usage of computer facilities, chemical analysis and data processing).*
* *PI must provide TOR for the consultant hired in this project.*
* *The expenses for the international collaborators will not be borne by the Partnership Grant.*
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|  **(vii)** | **Vote 35000 - Minor Equipment*** *Only purchase of special equipment and accessories (including accessories to upgrade the capability of existing equipment) directly related to the project should be included. (Less than RM10,000 per equipment not more than 30% of grant)*
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| **TOTAL AMOUNT** |  |  |  |  |

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| **H** | **Declaration by applicant** (**Please tick *( √ )****)* |
| **(i)** | **I hereby declare that:****All information stated here are accurate, the University of Malaya has right to reject or to cancel the offer without prior notice if there is any inaccurate information given.** ***Applicant’s Name:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***Signature*:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***Date***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **I** | **Supported by: Head of Centre of Excellence (CoE) / Coordinator of Research Cluster\*** |
| **(i)** | **Comments:**.......................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................**Name: Signature & Stamp:** **Date:** ***\*If the PI (applicant) is the Head of CoE.*** |