**APPLICATION FOR JOINT APPOINTMENT/PERMANENT TRANSFER/**

**TEMPORARY TRANSFER FOR ACADEMIC STAFF**

**(WITHIN KULLIYYAH/CAMPUSES IN IIUM)**

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| APPLICANT INFORMATION | |
| **Name & Staff No** |  |
| **Age** |  |
| **Job Title**  (Professor/ Assoc. Prof./ Asst. Prof./ Others) |  |
| **Current Academic Post (if any)** |  |
| **Department** |  |
| **Kulliyyah** |  |
| **Email Address** |  |
| **Date of Appointment** |  |
| **Job Status**  Permanent/Contract |  |
| **Contact No**  Mobile Phone |  |
| **Years with IIUM** |  |

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| TYPE OF APPLICATION |
| **JOINT APPOINTMENT**  **PERMANENT TRANSFER**  **TEMPORARY TRANSFER** |
| **JUTIFICATION FOR YOUR APPLICATION/REQUEST** |
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| RECOMMENDATION OF THE HEAD OF DEPARTMENT (EXISTING KULLIYYAH) |
| Recommended Not Recommended    Reasons by the applicant are acceptable? Yes No    Justification: …………………………………………………………………………………………………  ………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………  ……………………………………………………………………………………………………………  Recommended Effective Date*: 1st day of Sem I/\_\_\_\_\_\_\_\_ 1st day of Sem II/\_\_\_\_\_\_\_*    *1st day of Sem III/\_\_\_\_\_\_\_*  **(For Joint Appointment ONLY) % of Joint Responsibilities**  Proposed % of responsibilities at existing Kulliyyah: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other responsibilities (Please itemize):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Head of Department Date |

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| RECOMMENDATION FROM THE DEAN (EXISTING KULLIYYAH) |
| Recommended Not Recommended  Justification: ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  Recommended Effective Date*: 1st day of Sem I/\_\_\_\_\_\_\_\_ 1st day of Sem II/\_\_\_\_\_\_\_*    *1st day of Sem III/\_\_\_\_\_\_\_*    **(For Joint Appointment ONLY) % of Joint Responsibilities**  Proposed % of responsibilities at existing Kulliyyah: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other responsibilities (Please itemize):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature and name of the recommending Date  Kulliyyah |

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| RECOMMENDATION FORM THE DEAN (KULLIYYAH ACCEPTING JOINT APPOINTMENT/TRANSFER) |
| Recommended Not Recommended  Justification: ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  Recommended Effective Date*: 1st day of Sem I/\_\_\_\_\_\_\_\_ 1st day of Sem II/\_\_\_\_\_\_\_*    *1st day of Sem III/\_\_\_\_\_\_\_*  **(For Joint Appointment ONLY) % of Joint Responsibilities**  Proposed % of allowable responsibilities at accepting Kulliyyah: \_\_\_\_\_\_\_\_\_\_\_ Credit Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other responsibilities (Please itemize):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature and name of the recommending Date  Kulliyyah |

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| RECOMMENDATION OF EXECUTIVE DIRECTOR (MANAGEMENT SERVICES DIVISION) |
| Recommended Not Recommended  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Executive Director, MSD Date |

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| APPROVAL OF DEPUTY RECTOR (ACADEMIC & INTERNATIONALISATION) |
| Approved Not Approved  Remarks: …………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Deputy Rector (Academic & Internationalisation) Date |

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| APPROVAL OF RECTOR |
| Approved Not Approved  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Rector Date |