**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 RecommendedJustification: ………………………………………………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………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 RecommendedJustification: ………………………………………………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………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 |