

SOP #: SOP-RMC-01-03

Rev: V2 Date: 1/8/2020

PROJECT EXTENSION FORM SEGI INTERNAL RESEARCH FORM (SEGI IRF) [All forms must be typed. Expand the rows of the form if need to. Incomplete form will be rejected]

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DETAILS OF RESEARCHER				
A	RESEARCH TITLE : PROJECT LEADER: FACULTY: PROJECT MEMBERS: (including GRA)			
DETAILS OF RESEARCH				
В	Date Project Awarded: Date Project Completion (ORIGINAL): % Project Achievment (MILESTONES): Total Research Grant Approved (RM): Total Expenses (To Date) (RM): Balance Fund (RM): % Fund Utilised:			
APPLICATION FOR EXTENSION				
C	1 month 3 months 6 months New Date For Project Completion: Justification for Extension (please specify the reason):			



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SUPPORTING DOCUMENTS			
D	Enclosed herewith are the supporting documents to justify this application: 1. Progressive Report Form 2. Summary of Financial Report 3. New Gantt Chart with Updated Milestones		
	Date: Project Leader's Signature:		
COMMENTS, IF ANY/ ENDORSEMENT BY DEAN / HEAD OF FACULTY / SCHOOL			
E	Result: Extension Approved Extension Not Approved		
	Name: Signature:		
	Date:		



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COMMENTS, IF ANY/ ENDORSEMENT BY DIRECTOR, RIMC			
F			
	Result: Extension Approved	Extension Not Approved	
	Name:	Signature:	
	Date:		