

	UNIVERSITI TEKNIKAL MALAYSIA MELAKA CENTRE FOR RESEARCH AND INNOVATION MANAGEMENT
	APPLICATION FOR PROJECT EXTENSION <i>(WITHOUT CHANGE IN TOTAL PROJECT VALUE)</i>

TYPE OF GRANT (Please tick √ which grant)										
PJP	FRGS	LRGS	TRGS	ERGS	GLUAR	RAGS	RACE	PPRN	PRGS	KTP
INTERNATIONAL										

NUMBER OF EXTENSION (Please tick √)		
1 st Extent	2 nd Extent	3 rd Extent

A. PROJECT DETAILS (to be filled by Principle Researcher)
Principal Researcher : _____ Faculty/Centre : _____ Project Title : _____ Project No. : _____ Contact No. (Off. / Hp.) : _____ E-mail : _____ Project Duration (date) : From _____ To: _____ Total Project Value (RM) : _____

B. EXTENSION DETAILS (to be filled by Principle Researcher)						
Note : *Only ONE extension of maximum 6 months is allowed for University Research Grant (PJP)						
<table border="1"> <tr> <th>Number of Months Needed for Extension</th> <th>Proposed New Completion Date</th> <th>% of utilization</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Number of Months Needed for Extension	Proposed New Completion Date	% of utilization			
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Submission of Progress Report	Yes (Done) / No	Checked by CRIM
1 st Cycle: Starts to 6 th months		
2 nd Cycle: 7 th to 12 th months		
3 rd Cycle: 13 th to 18 th months		
Additional period:		

REASONS FOR EXTENSION PROJECT:

- 1.
- 2.
- 3.

C. SIGNATURE OF PRINCIPAL RESEARCHER
Signature : Official stamp : Name : Designation : Date :
D. APPROVAL BY DIRECTOR / DEPUTY DIRECTOR OF CRIM
Approved - months given Not Approved
- New Project Completion date
Comments:
Signature : Official stamp : Name : Designation : Date :