



الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
بُونَيَسِيْتِيْ اِسْلَامِيْ اِنْتَارَا بَحْسِيْا مَلِيْسِيَا

MANAGEMENT SERVICES DIVISION

APPLICATION FOR PART-TIME LECTURER (ACADEMIC)

New Application

Re-appointment (Staff ID.: _____)

1. APPOINTMENT CLASSIFICATION

| Nature of Appointment | Minimum Qualification | Please Tick |
|---|-----------------------|--------------------------|
| Teaching Postgraduate Courses | Ph.D., Master | <input type="checkbox"/> |
| Teaching Undergraduate Courses | Ph.D., Master | <input type="checkbox"/> |
| Teaching Pre-University Courses (CFS/CELPAD) | Master, Bachelor | <input type="checkbox"/> |
| Demonstrator/Practical Instructor/Credited Co-Curriculum Courses | Bachelor | <input type="checkbox"/> |
| | SPM/STPM | <input type="checkbox"/> |

Rate of payment shall be according to the approved rate by the University.

2. APPLICANT INFORMATION

| | |
|---|--|
| Name | |
| IC No | |
| Gender | |
| Date of Birth / Place | |
| Nationality (please state if Permanent Resident) | |
| Passport No./Issuance Date | |
| Expiry Date of Passport | |

| | | |
|---|---|---------------------|
| Type of Current Immigration Pass (Compulsory for International Applicant) | Type: | Permit No.: |
| | Issuance Date: | Expiry Date: |
| Home Address | | |
| Contact No. Mobile Phone | | |
| Present Occupation | | |
| Name & Address of present employer (if still working) | | |
| EPF No | | |
| Income Tax No | | |
| Particular Next of Kin | Name: Contact No.: Address: Relationship with Applicant: | |

| |
|----------------------------------|
| 3. ACADEMIC QUALIFICATION |
|----------------------------------|

| Name of Schools/Universities/Colleges | Period of Study | | Certificate Obtained | Medium of Instruction |
|---------------------------------------|-----------------|----|----------------------|-----------------------|
| | From | To | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

4. RECOMMENDATION OF THE FINANCE ZONE

Part-Time budget is sufficient?

Yes

No

*Balance of Budget: RM _____ (including commitment)

Finance Zone_____
Date**5. RECOMMENDATION FROM HEAD OF DEPARTMENT**

| No. | Details on the request | Please Indicate | |
|-----|---|--|--|
| 1. | Department where the applicant to be placed | | |
| 2. | Subject(s) to be taught | | |
| 3. | Department Ratio by Standard MQA/Professional Board | 1: _____ | |
| 4. | (a) Number of Staff: (b) Number of Student: | (a):(b) = (b) / (a) 1: _____ | |
| 5. | Period of appointment | | |
| 6. | Will prepare examination papers and/or answer scripts? | | |
| 7. | Estimated total payment (i) Please refer to the rate of payment for Part Time Lecturer (ii) University has the right to reject the application if the budget is not sufficient. | 1. (Total Hours/Month: _____) X (Rate/Hour RM _____) X _____ month (s) 2. EPF Employer's Contribution Rate 3. SOCSO Contribution Rate *TOTAL PAYMENT: | RM _____ RM _____ RM _____ RM _____ |

Recommended

Not Recommended

Head of Department_____
Date

6. APPROVAL FROM THE DEAN/DIRECTOR

Part – time **budget is adequate** to support the payment during the appointment period and to proceed with the **Appointment Letter**.
(Offer letter should not be earlier than the approval date stated below)

Do not proceed.

Dean/Director

Approval Date

7. KULLIYAH/CENTRE/DIVISION (GENERAL OFFICE)
Please proceed this part if Dean/Director gives the approval

Attached herewith the followings documents for generating Part-Time Lecturer ID:

Appointment Letter

EPF Statement

Copy of Identification Card

Copy of Passport – *for International Applicant (1st Page)*

Bank Account Statement (1st Page)

Copy of Immigration Pass – *for International Applicant*

Deputy Director

Date

8. ACADEMIC (EMPLOYMENT) UNIT, MANAGEMENT SERVICES DIVISION

ID to be generated

Do not generate ID

Senior Assistant Director, EAU MSD

Date