

GRADUATE PROGRAMS BY RESEARCH - OVERSEAS RESEARCH ATTACHMENT

Note

Overseas research attachments of one year or less can be approved by the Chair. Attachments which exceed one year have to be put up via Chair of the School to Dean, Graduate Studies Office for consideration.

A. To be Completed by Research Student

Name of Candidate : _____

Matriculation No : _____

School : _____ Program : PhD / Master's ***

*** Delete where appropriate.

Research Title

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Name of Supervisor(s)

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I declare that the research work undertaken during the overseas attachment is meant for my research thesis.

Signature : _____ Date : _____

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B. To be Completed by Supervisor

Overseas Attachment	Start Date (DD-Month-YYYY)	
	End Date (DD-Month-YYYY)	
Host University or Research Institute	Name	
	Country	
Allowance [#]	Source of Allowance	
	Amount of Allowance	
Details of the attachment (if insufficient space, please attach papers).		

[#] The allowance is either given by the host or NTU to the candidate for the period of the attachment. This is in addition to the candidate's current scholarship, if any.

Please tick relevant option(s).

- ☐ I support the overseas research attachment (as indicated above) for the candidate.
- ☐ During the period of attachment, please continue the candidate's monthly scholarship under the _____ (please specify, eg Teaching Assistant Scheme, Project Account No, etc).

Reasons for the continuation (please state) :

- ☐ During the period of attachment, please stop the candidate's monthly scholarship under the _____ (please specify, eg Teaching Assistant Scheme, Project Account No, etc).

_____	_____	_____
Name	Signature	Date

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C. To be Completed by Chair of School (or Assoc Chair on his behalf)

Please tick relevant option(s).

- ☐ I approve the overseas research attachment (as indicated above) for the candidate.
- ☐ I approve the continuation of the candidate's monthly scholarship under the _____ (please specify, eg Teaching Assistant Scheme, Project Account No, etc) during the period of attachment.
- ☐ I approve the discontinuation of the candidate's monthly scholarship under the _____ (please specify, eg Teaching Assistant Scheme, Project Account No, etc) during the period of attachment.

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Name	Signature	Date

cc Graduate Studies Office	-	For update of candidate's record, please.
Office of Finance]	
(Attn : Ms Catherine Chew)]	For your necessary action, please.
Office of Finance]	
(Attn : Ms Koh Lay San)]	

Last Updated 12 August 2005