



UNIVERSITI
PENDIDIKAN
SULTAN IDRIS
اونيزستى قنديدين سلطان ادريس

SULTAN IDRIS EDUCATION UNIVERSITY

Sultan Idris Education University
35900 Tanjong Malim
Perak Darul Ridzuan, Malaysia
Tel : 605 - 450 6000
Fax: 605 - 459 5488
www.upsi.edu.my
E-mail : admin@upsi.edu.my

CHECKLIST FOR FOREIGN LECTURERS

1. Application Form (duly completed)
2. Certified copy of Applicant's passport
3. *** Certified copy of passport of spouse and child/children
4. Passport size Applicant's photograph
5. *** Passport size photograph of spouse and child/children
6. Certified copy of Academic Transcripts and Scrolls (Bachelor, Masters, Doctoral Degrees) in English translation
7. Updated Curriculum Vitae

*** Necessary only if bringing in together spouse and child/children to Malaysia.

Queries/information, please contact or e-mail:

Mdm. Siti Rafidah binti Mukdan
Mr. Mohd Rikzan Idris
Mr. Ahmad Mustafa bin Musa

email : srafidah@upsi.edu.my
email : mrikzan@upsi.edu.my
email : mustafamusa@upsi.edu.my

"NO.1 EDUCATION UNIVERSITY"

For Office Use

LPU	MPE
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1 recent passport size photograph for each application
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APPLICATION FORM

Please fill in BLOCK LETTERS and submit by email or postal.

POSITION	FIELD	FACULTY
PROFESSOR		
ASSOCIATE PROFESSOR		
SENIOR LECTURER		
LECTURER		
MEDICAL OFFICER		
DENTAL OFFICER		
LANGUAGE TEACHER		

(Fill in the appropriate)

Name :	<i>(Underline surname)</i>
Postal Address :	
	Tel. No. :
Fax No. :	E-Mail Address:
Date and Place of Birth :	Sex :
Domicile : <i>(State Country, Town/Village)</i>	
Citizenship :	Passport No. :
Marital Status :	No. of Children & Ages :
Name of Spouse :	Citizenship of Spouse :

EDUCATION *(Please attach a copy of each Degree obtained)*

Degree	University/College	Field	Year

Title of Masters/Doctorate dissertation *(Please attach abstract)*

Indicate specific areas in which you consider yourself competent to teach in

Research interest *(where applicable)*

Academic awards *(with date and place)*

WORKING EXPERIENCE (Previous Positions with full date. If space is insufficient please attach additional sheet)

DATE		EMPLOYER	POST HELD
From Month/Year	Until Month/Year	Name and Full Address	Please indicate nature of duties

PRESENT POSITION	PRESENT SALARY	NAME AND FULL ADDRESS OF PRESENT EMPLOYER	DATE OF APPOINTMENT

PUBLICATIONS: Authors, Titles, Journals and Date (if space is insufficient, please attach additional sheet). Publications should only include research articles, books and research papers accepted for publication in recognized academic journals/books.

AUTHOR	TITLE	JOURNAL	DATE

ADDITIONAL INFORMATION (Additional Experience gained in teaching or industry and commerce)

REFEREES: Please give the name and address of three referees. (They should be able to comment authoritatively upon your academic qualities). Please request your referees to write directly to us in the form enclosed.

Name of Referee	Full Address
1.	
2.	
3.	

How did the vacancy for which you are applying come to your attention?

I declare that all information furnished on this form is true and correct. The University may withdraw or terminate the appointment if any information in this form is found to be untrue.

Date: _____

Signature: _____