



APPLICANT'S DETAILS

NAME : _____
 PROGRAMME : _____ MATRIC/STAFF NO.: _____
 SCHOOL/ DEPT.: _____ MOBILE/ OFFICE NO.: _____
 EMAIL : _____

SUPERVISOR'S DETAILS

NAME : _____ OFFICE NO.: _____
 EMAIL : _____ MOBILE NO.: _____

SERVICE(S)

EDITING : _____ (_____ words) / _____ (_____ words)
 TRANSLATION : Original: _____ (_____ words) to _____

Document title:

TERMS AND CONDITIONS:

- By signing this form, I agree to abide the following:
- i. I understand that the editor is not responsible for the content of material(s).
 - ii. I am aware that the editing and/or translation process will take a MINIMUM of 7 working days for each material submitted.
 - iii. I am submitting my work for editing and/or translation after it had been approved by my supervisor. *if applicable
 - iv. I agree to clear all fees levied on my services according to the conditions set by the Professional Development Unit before I am able to collect my edited and/or translated material(s).
 - v. I agree that all follow up matters will be done using email.
 (editorslcp@uum.edu.my)

Applicant's
 Signature: _____

Date : _____

FOR OFFICE USE ONLY

<p>Editor / Translator 1 : _____ Date sent : _____ Date received : _____</p> <p>Editor / Translator 2 : _____ Date sent : _____ Date received : _____</p>	<p>CHARGES:</p> <p>words x RM = RM words x RM = RM</p> <p>Rounding = RM GRAND TOTAL = RM</p>
---	--



Dear Sir/Madam

SUPERVISOR'S CONSENT

With reference to the application for editing and/or translation made by the following student:

Name: _____ Matric No.: _____

entitled:

I would like to confirm that I have checked and agree to the content of the material submitted.

Thank you.

Yours faithfully

Name :

Date :

Official stamp :