



Research and Grants Management Office 3/F, Henry Sy, Sr. Hall

TERMSOF REFERENCE

Name:						Project Rde/ Position:	
TIN:				Address:			
Amount	of Honorari	um:				Appointment Duration:	
Project ¹	Titl e:						
Name of	f Project Lea	der:				Project Account Number:	
Project Objectives:							
Responsibilities of Project Member Project Leader Consultant							
Impler	menting C	enter	/In stitutio	n: Resea	arch a	nd	
						-	