



UMS
UNIVERSITI MALAYSIA SABAH

RESEARCH DATA LABORATORY
FACULTY OF SCIENCE AND NATURAL RESOURCES
JALAN UMS, 88400 KOTA KINABALU, SABAH
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DATA APPLICATION FORM

Reference no.:

Name of Applicant:

Staff/ Student ID No.:

Faculty:

Programme:

Category:

- Lecturer
- Student

For Student Applicants Only

Please provide the following information

Supervisor's Name: _____

Supervisor's E-mail: _____

Course Lecturer: _____

E-mail:

Contact Number: (Office)

(Mobile)

Period of Data Usage

Duration: _____ months

Start Date: ____/____/____ (Day/Month/Year)

End Date: ____/____/____ (Day/Month/Year)

(Academicians: Maximum 1 year)

(Bachelor/ Master by coursework: Maximum 6 months)

(Master by research/ PhD: Maximum 1 year)

Purpose of Data Usage

Teaching and Learning: _____

Research: _____

Details Of The Requested Data

DATA (Mark X in box where applicable)	YEAR	VARIABLES	DATA SIZE (n)
<input type="checkbox"/> HIS			
<input type="checkbox"/> HES			
<input type="checkbox"/> MANUFACTURING			
<input type="checkbox"/> LABOUR FORCE			
<input type="checkbox"/> CENSUS			

*Kindly note that a refundable RM50 deposit of CD is required for each successful application.

Remarks: _____

Justification: (Specific case only: To request more than one category of data)

Signature of RDL Committee

Date:
Name:

Signature and official stamp:

Signature of Department Head

Date:
Name:

Signature and official stamp:

FOR RDL OFFICE USE ONLY

Application is
 Approved
 Not Approved

Comments: _____

Date:
Name:

Signature and official stamp: