**Request for External Affiliation**

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| **General Information** | |
| **Applicant’s Details** | |
| **Name** |  |
| **Department/Center** |  |
| **KFUPM Join Date** | DD/MM/YYYY |
| **KFUPM Affiliation** | |
| **Department/Center**  (current full affiliation to KFUPM in research outputs) |  |
| **Requested Dual Affiliation** | |
| **University/Institute**  (requested affiliation to non-KFUPM in research outputs) |  |
| **KFUPM Faculty/Researcher Status** | |
| **Holding position prior to joining KFUPM  Leave without pay  New faculty/researcher** | |
| **Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Justification for the External Affiliation** | |
| *Please provide in detail the main purpose of the request of having an external affiliation, supporting documents, the type of research output with such an arrangement, and exact duration to be effective. You are not allowed to express any affiliation until you receive VPRI’s approval (Affiliation Letter).* | |
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| **Supporting Documents (enclosed)** | |
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| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Applicant’s Signature Date** | |
| **DROC Screening and Endorsement** | |
| *The application and the supporting documents have been screened by the DROC according to the University regulations for dual affiliation.* | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Dean, Deanship of Research Oversight Date**  **and Coordination** | |