Form 7

Application form for change of breakdown of the Inter-University Research Program fund

(To be submitted when changing more than 50% of the assessed amount)

Date:

xxxx Division Head or xxxx Center Director

Applicant's name: xxxx

Affiliation: xxxx

Research Proposal Title:

Reason for the change:

↓Double click to open an Excel file. Fill in the amount in yellow on the table.

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**(Note:** **This matter will be decided after consultation with the ICRR Director.)**