

**Final Report and Feedback Form**

**Principles and Compensation Rates for Adjunct Professor with research published in journals in the international databases B.E.2565**

**Note:** This final report and feedback form consists of 3 parts: 1) General information 2) Final report of the research project and 3) Satisfactory level. Please complete this form using a computer, and sign by hand or e-signature. This form is to be completed by the MU Lecturer/Researcher.

**Part I: General information**

MU Lecturer/Researcher’s name and surname:………………….......................................……..........……………..

Adjunct Professor’sname and surname:……………………………….........……………….

Affiliated Faculty/College/Institute: ……………………………………….........................................................… Department:………………………………………………………………….

Tel.: ……………………………………...........………….. E-mail: …………………………………………………………………..…………

**Part II: Final report of the research project**

Title of the research project: …………………………………………………………

Research project duration:………….(dd/mm/yy) ...to .....(dd/mm/yy)…………………..

Summary of the research project:

…………………………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………………

Project output (Please specify details of publications, patents, conferences, workshops, awards, certificates or other relevant matters.)

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Outcomes/benefits from the research project

…………………………………………………………………………………………………………………………………………………………………

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**Part III: Satisfactory level** Pleasecheck (✓) the appropriate boxes as follows:

**5** = Very satisfied **4** = Satisfied **3** = Average **2** = Unsatisfied **1** = Very unsatisfied

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No** | **Details** | **Score** | | | | |
| **5** | **4** | **3** | **2** | **1** |
| **Information, Facilitation and Arrangements** | | | | | | |
| 1 | Financial support by Mahidol University |  |  |  |  |  |
| 2 | Information provided by the affiliated Faculty/ College/ Institute prior to arrival and during the stay |  |  |  |  |  |
| 3 | Onsite arrangements by the affiliated Faculty/ College/ Institute |  |  |  |  |  |
|  | * Accommodation |  |  |  |  |  |
|  | * Office, laboratory, equipment, and other facilities |  |  |  |  |  |
| **Experience Gained** | | | | | | |
| 4 | Sharing and exchanging of professional/academic experiences |  |  |  |  |  |
| 5 | Enriching personal/cultural experiences |  |  |  |  |  |
| 6 | Expanding academic network |  |  |  |  |  |
| 7 | Learning more about Mahidol University |  |  |  |  |  |
| **Satisfaction** | | | | | | |
| 8 | Overall satisfaction |  |  |  |  |  |

**More comments/suggestions to improve the program**

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Please submit a copy of the written notification of manuscript for publication at least 2 research papers, as the first author or the second author of MU lecturer or researcher, in journals which are in international databases such as Scopus or Web of Science, and are in the 10% of journals ranked by SCImago Journal Rank (SJR) in the fields of Life Sciences and Medicine.

Signature: ……………………………………………………….. Adjunct Professor

…………………………..……(Full name)…………..……….

Date \_\_\_/\_\_\_\_/\_\_\_\_

Signature: ……………………………………………………….. MU Lecturer/researcher

……………………………..……(Full name)…………………

…………………………..………(Position)…………………….

…………………..…..……….(Faculty)………………………..

**Thank you for your kind cooperation.**

Please submit the completed form (Form IR AP3) to

the International Relations Division, Office of the President,

for consideration and acknowledgement by the Committee

upon the completion of the funding program.