

## INSTITUTIONAL FACT SHEET

Please complete **ALL** sections

### A. GENERAL INFORMATION

<b>Name of Institution:</b>			
<b>Official Address:</b>		<b>Country:</b>	
<b>Type (Public or Private):</b>			
<b>President / Vice-Chancellor / Rector:</b>			
<b>Year Founded:</b>			
<b>Website:</b>			
<b>Overview of the Institution:</b>			
<b>No. of Campuses &amp; Location(s):</b>			
<b>Contact Details of International Relations Office:</b>	<b>Head of Office:</b>		
	<b>Address:</b>		
	<b>Phone no.:</b>		<b>Fax no.:</b>
	<b>E-mail:</b>		
<b>Accreditation [National / international]</b>			

### B. ACADEMIC BACKGROUND OF INSTITUTION

<b>Faculties / Schools / Departments:</b> <i>(kindly attach a separate list if space is insufficient)</i>	
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<b>Strengths / Centres of Excellence:</b> <i>(kindly attach a separate list if space is insufficient)</i>	
<b>List of Courses that are Taught in English</b> <i>(kindly attach a separate list if space is insufficient)</i>	

### C. STUDENT AND STAFF STATISTICS

<b>No. of Academic Staff:</b>		Professors:	
		Associate Professors:	
		Lecturers:	
		Others:	
<b>No. of Professional / Administrative Staff:</b>			
<b>No. of Students:</b>		<b>Local</b>	<b>International</b>
Undergraduate			
Postgraduate	Master's:		
	Ph.D.:		

### D. RANKINGS AND INTERNATIONAL NETWORKS

<b>University Ranking:</b>	<b>QS World University Ranking:</b>		
	<b>Times Higher Education World University Ranking:</b>		
	<b>Academic Ranking of World Universities (ARWU):</b> <i>(Shanghai Jiao Tong World University Ranking)</i>		
	<b>Others</b> <i>(please list):</i>		

<b>Global Partners:</b> <i>(kindly attach a separate list if space is insufficient)</i>	
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**E. ON-GOING COLLABORATION WITH UM** (if any)

No .	Title / Theme	Yes / No (if Yes, please elaborate)
1	Joint supervision	
2	Joint Publication	
3	Joint Grant Application	
4	Student Exchange	
5	Staff Exchange [academic / non-academic]	
6	Others	Please specify:

**F. PROPOSED IMPACTFUL COLLABORATION WITH UM** (if any)

No .	Title / Theme	Details

**G. PRIOR CONTACT WITH SPECIFIC FACULTIES AT UM?** [Yes / No]

(if Yes, please specify)

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