



University Research Coordination Office
3/F, Henry Sy, Sr. Hall

TERMS OF REFERENCE

Name: Project Role/Position:

TIN: Address:

Amount of Honorarium: Appointment Duration:

Project Title:

Name of Project Leader: Project Account Number:

Project Objectives:

Responsibilities of Project Member Project Leader Consultant

Implementing Center/Institution:

*Note: The Center/Institution/Unit has to make sure that the appropriate project funds are available to support the honorarium of the said Project Member/Project Leader.

Signature over Printed Name

CONFORME:

Project Team Member Date Faculty Proponent Date

NOTED BY:

Dr. Feorillo P. A. Demeterio III Dr. Raymond Girard R. Tan
URCO Director VCRI Date Date