



Office of the Vice Chancellor
for Research and Innovation

**TERMS OF REFERENCE
(for DLSU Faculty Members only)**

Name: Project Role/Position:

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 Research Center 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 Member Date Project Leader Date

NOTED BY:

Center Director Date

URCO Director Date VCRI Date