**Application for RLC/ CWLC 3.0 Units or less**

_**Date Accomplished (DD - MM - YY)**_  

_**Academic Year (YY - YY - T*)**_  

*Term for new application for RLC/ CWLC: 1, 2, 3, S (Summer)*

**I. Faculty Information**

- **Name:**  
- **Designation and Rank (D - RR):**  
  - [ ] Instructor  
  - [ ] Asst. Prof  
  - [ ] Assoc. Prof  
  - [ ] Full Prof

**II. Research / Creative Work / Textbook Writing Information**

- **Project Type:**  
  - [ ] Research Program  
  - [ ] Research Project  
  - [ ] Creative Work  
  - [ ] Publication / Textbook Writing

- **Project Status:**  
  - [ ] New  
  - [ ] Continuing

- **Project Title:**

**III. Funding Information**

- **Funding Institution’s Full Name:**
  - [ ]  
  - [ ] 

- **Funding Institution’s Classification:**
  - [ ] UP Diliman  
  - [ ] UP System  
  - [ ]  
  - [ ]  

- **Total Amount:**

- **Major Equipment purchased from project funds (greater than Php100,000):**
  - [ ]  
  - [ ] 

**Notes:**

1. Please submit using the Excel template and one (1) original signed copy.
2. Write the appropriate number in box where applicable.
3. Accomplish one page per project. Indicate number of attached page/s of Form 67-C1d (for add’l project/s):

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**I certify that I have submitted the proper progress report, final report or proof of output of the latest grant of RLC/ CWLC. The date of receipt at OVCRD is (DD-MM-YY):**

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**Faculty Advisor Signature:**

**Dean’s Approval:**

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**Approved:**

(Not a basis for claiming overload honorarium)
# Application for RLC/ CWLC More than 3.0 Units

**Funding is Required**

Date Accomplished (DD - MM - YY) —

Academic Year (YY - YY - T*) —

*Term for new application for RLC/ CWLC: 1, 2, 3, 5 (Summer)

Notes:
1. Please submit using the Excel template and one (1) original signed copy.
2. Write the appropriate number in box where applicable.
3. Accomplish one page per project. Indicate number of attached page/s of Form 67-C1d (for add'l project/s):

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## I. Faculty Information

<table>
<thead>
<tr>
<th>a. Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>b. College/ Unit:</td>
<td>Inst./ Dept./ Div.:</td>
</tr>
<tr>
<td>c. Designation and Rank (D - RR):</td>
<td></td>
</tr>
<tr>
<td>1 Instructor*</td>
<td>2 Asst. Prof</td>
</tr>
<tr>
<td>*May only apply for Study Load Credit</td>
<td></td>
</tr>
<tr>
<td>d. Nature of Involvement in Project:</td>
<td></td>
</tr>
<tr>
<td>1 Program Leader</td>
<td>2 Project Leader</td>
</tr>
</tbody>
</table>

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## II. Research / Creative Work / Textbook Writing Information

<table>
<thead>
<tr>
<th>a. Project Type:</th>
<th>PLEASE ATTACH CAPSULE PROPOSAL OR ACTUAL GRANT/ CONTRACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Research Program</td>
<td>2 Research Project</td>
</tr>
<tr>
<td>b. Project Status:</td>
<td>1 New</td>
</tr>
<tr>
<td>c. Project Title:</td>
<td></td>
</tr>
<tr>
<td>d. College/ Unit Research Agenda Theme or Topic that is most associated:</td>
<td></td>
</tr>
<tr>
<td>e. Date Started (DD - MM - YY) —</td>
<td>f. Date of Completion (DD - MM - YY) —</td>
</tr>
<tr>
<td>g. Percent of Work Accomplished (if continuing):</td>
<td>%</td>
</tr>
<tr>
<td>h. Expected Output (for the new application for RLC/ CWLC):</td>
<td></td>
</tr>
<tr>
<td>1 research project with corresponding technical report</td>
<td>2 creative work with corresponding permanent documentation</td>
</tr>
<tr>
<td>3 accepted, peer-reviewed article in a national/ international journal</td>
<td>4 creative output in a national/ international forum or presentation</td>
</tr>
<tr>
<td>5 national policy, regulation, bill, or law w/ public acknowledgment</td>
<td>6 mentored doctoral candidate or masteral graduate</td>
</tr>
<tr>
<td>7 new patent claim</td>
<td>8 others, please specify</td>
</tr>
<tr>
<td>i. Current Doctoral Dissertation/ Masteral Thesis Advisee:</td>
<td></td>
</tr>
<tr>
<td>Name:</td>
<td>Student No:</td>
</tr>
</tbody>
</table>

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## III. Funding Information

<table>
<thead>
<tr>
<th>a. Funding Institution's Full Name:</th>
<th>a.1</th>
<th>a.2</th>
<th>a.3</th>
</tr>
</thead>
<tbody>
<tr>
<td>b. Funding Institution's Classification:</td>
<td>b.1</td>
<td>b.2</td>
<td>b.3</td>
</tr>
<tr>
<td>1 UP Diliman</td>
<td>2 UP System</td>
<td>3 DOSt</td>
<td>4 Phil. Gov't (except UP &amp; DOSt)</td>
</tr>
<tr>
<td>5 NGO</td>
<td>6 Private</td>
<td>7 Foreign (please indicate if gov't, NGO, private)</td>
<td></td>
</tr>
<tr>
<td>Total Amount:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indicate currency if not in pesos</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Major Equipment purchased from project funds (greater than Php100,000):</td>
<td>c.1</td>
<td>c.2</td>
<td>c.3</td>
</tr>
</tbody>
</table>

I certify that all information/data in this form are true to the best of my knowledge. I understand that a report or proof of output is to be submitted to the OVCRD at the end of the semester or term for which RLC/ CWLC is granted and at the end of the project period. I further certify that I have no overdue accountabilities for OVCRD-funded and managed projects.

Signature of Faculty Member

We certify that we have reviewed this application and that the recommended load credits were pre-assigned based on the College/ Unit's approved Research/ Creative Work Agenda for the Academic Year. We further certify that this application complied with the College/Unit's detailed guidelines and was evaluated by the College Executive Board or equivalent body.

Name and Signature of Institute Director/ Department Chair/ Division Head

Name and Signature of Dean

RLC/ CWLC units requested:

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Benito M. Pacheco, Ph.D. 
Vice Chancellor for Research and Development

Ronald S. Banson, Ph.D. 
Vice Chancellor for Academic Affairs

Caesar A. Saloma, Ph.D. 
Chancellor

RLC/ CWLC units approved:

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UP Form 67-C1c (Revised 30 April 2012) APPLICATION FOR RLC/ CWLC 3.0 UNITS OR LESS WITHOUT PROJECT FUNDING
WITH OPTIONAL APPLICATION FOR OVERLOAD HONORARIUM

Date Accomplished (DD - MM - YY) __________
Academic Year (YY - YY - T*) __________
*Term for new application for RLC/ CWLC: 1, 2, 3, 5 (Summer)

Notes: 1) Please submit using the Excel template and one (1) original signed copy.
2) Write the appropriate number in box [ ] where applicable.
3) Accomplish one page per project. Indicate number of attached page/s of Form 67-C1d (for add'l project/s):

I certify that I have submitted the proper progress report, final report or proof of output of the latest grant of RLC/ CWLC. The date of receipt at OVCRD is (DD-MM-YY): __________

I. FACULTY INFORMATION

a. Name:

b. College/ Unit __________________Inst./ Dept./ Div.:

c. Designation and Rank (D - RR):

1. Instructor
2. Asst. Prof
3. Assoc. Prof
4. Full Prof
* May only apply for Study Load Credit

d. Nature of Involvement in Project:

1. Program Leader
2. Project Leader
3. Co-Project Leader
4. Artist
5. Author

II. RESEARCH / CREATIVE WORK / TEXTBOOK WRITING INFORMATION

a. Project Type: PLEASE ATTACH CAPSULE PROPOSAL OR ACTUAL GRANT/ CONTRACT:

1. Research Program
2. Research Project
3. Creative Work
4. Publication / Textbook Writing

b. Project Status:

1. New
2. Continuing

c. Project Title:

b. College/ Unit Research Agenda Theme or Topic that is most associated: __________________________

e. Date Started (DD - MM - YY) __________
f. Date of Completion (DD - MM - YY) __________
g. Percent of Work Accomplished (if continuing) % __________

h. Expected Output (for the new application for RLC/ CWLC):

1. Research project with corresponding technical report
2. Creative work with corresponding permanent documentation
3. Accepted, peer-reviewed article in a national/ international journal
4. Creative output in a national/ international forum or presentation
5. National policy, regulation, bill, or law w/ public acknowledgment
6. Mentored doctoral candidate or masteral graduate
7. New patent claim
8. Others, please specify: __________________________

i. Current Doctoral Dissertation/ Masteral Thesis Advisee:

Name: ____________________ Student No. __________

III. JUSTIFICATION FOR RLC/ CWLC EVEN WITHOUT PROJECT FUNDING

IV. JUSTIFICATION FOR OVERLOAD HONORARIUM

Maximum unit/s requested for overload honorarium: __________

I certify that all information/data in this form are true to the best of my knowledge. I understand that a report or proof of output is to be submitted to the OVCRD at the end of the semester or term for which RLC/ CWLC is granted and at the end of the project period. I further certify that I have no overdue accountabilities for OVCRD-funded and managed projects.

Signature of Faculty Member __________________________

We certify that we have reviewed this application and that the recommended load credit/s was/were pre-assigned based on the College/ Unit’s approved Research/ Creative Work Agenda for the Academic Year. We further certify that this application complied with the College/Unit’s detailed guidelines.

Name and Signature of Name and Signature of
Institute Director/ Department Chair/ Division Head RLC/ CWLC units recommended: __________

Recommendation approval: (Not a basis for claiming overload honorarium)

Approved: (Not a basis for claiming overload honorarium)

BENITO M. PACHECO, Ph.D. RONALD S. BANZON, Ph.D. CAESAR A. SALOMA, Ph.D.

Vice Chancellor for Research and Development
Vice Chancellor for Academic Affairs
Chancellor

RLC/ CWLC units approved: __________
I. FACULTY INFORMATION

a. Name: ________________________________

d. Nature of Involvement in Project:
   1 Program Leader  2 Project Leader  3 Co-Project Leader  4 Artist  5 Author

II. RESEARCH / CREATIVE WORK / TEXTBOOK WRITING INFORMATION

a. Project Type:
   1 Research Program  2 Research Project  3 Creative Work  4 Publication / Textbook Writing
b. Project Status:
   1 New  2 Continuing
c. Project Title: ________________________________

d. College/Unit Research Agenda Theme or Topic that is most associated: __________________________________________

e. Date Started (DD - MM - YY): ____________________
f. Date of Completion (DD - MM - YY): ____________________
g. Percent of Work Accomplished (if continuing): [ ] %

h. Expected Output (for the new application for RLC/CWLC):
   1 research project with corresponding technical report
   2 creative work with corresponding permanent documentation
   3 accepted, peer-reviewed article in a national/ international journal
   4 creative output in a national/ international forum or presentation
   5 national policy, regulation, bill, or law w/ public acknowledgment
   6 mentored doctoral candidate or masteral graduate
   7 new patent claim
   8 others, please specify: __________________________________________

i. Current Doctoral Dissertation/ Masteral Thesis Advisee:
   Name: ___________________________  Student No.: __________

III. FUNDING INFORMATION

At least part of the project is already funded.

a. Funding Institution’s Full Name: a.1) ____________________________  a.3) ____________________________
   a.2) ____________________________  a.4) ____________________________

b. Funding Institution’s Classification: b.1) 1 UP Diliman  2 UP System  3 DOSt  4 Phil. Govt. (except UP & DOSt)  5 NGO  6 Private  7 Foreign (please indicate if
   b.2) 8 others, please specify: ____________________________
   b.3) 9 pending

   Total Amount: ____________________________
   Indicate currency if not in pesos

c. Major Equipment purchased from project funds (greater than Php100,000):
   c.1) ____________________________  c.3) ____________________________
   c.2) ____________________________  c.4) ____________________________

I certify that all information/data in this form are true to the best of my knowledge. I understand that a report or proof of output is to be submitted to the OVCRD at the end of the semester or term for which RLC/CWLC is granted and at the end of the project period. I further certify that I have no overdue accountabilities for OVCRD-funded and managed projects.

______________________________
Signature of Faculty Member