

# National Assembly Secretariat

Research Centre

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## Research Request Performa (RRP)

Name of Legislator: -----

Telephone: -----

Mobile: -----

Email Address: -----

Topic: -----

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Nature of Request	Tentative time frame for Completion
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Background Paper Fifteen Days

Position Paper Fifteen Days

Country Paper Fifteen Days

Policy Briefs Fifteen Days

Info Paper Four Days

Factsheet Seven Days

Date of Request----- Requestor's Signature-----

Deadline-----

### For official use only

Received Date: \_\_/\_\_/\_\_ Assigned to:----- Deadline-----

Completed Task submitted on: \_\_/\_\_/\_\_ by:----- Signature of RO:-----

Sent to SRO:----- Date: \_\_/\_\_/\_\_ Director:-----

Remarks (if any)-----

Director General:-----