



PERKHIDMATAN UTAMA SISWAZAH

**PEJABAT TIMBALAN NAIB CANSOLOR
(AKADEMIK & ANTARABANGSA)
Kod Dokumen: PG/ACA/GS-52**

**APPLICATION FOR REVIEW AGAINST TERMINATION-
TERMINATED (EXCEEDED DURATION)**

PART A TO BE COMPLETED BY STUDENT

1. Full name : _____

2. Matric no. : _____ 3. Programme: _____

4. Programme structure:

by Research

by Coursework

5. No. of registered semester: _____ 6. Current semester : _____

7. Field of study: _____

8. School/Faculty/Institute: _____

9. Current study status: _____

10. Occupation (if any): _____

[Please attach your employment letter/ Suruhanjaya Syarikat Malaysia (SSM)'s certificate (for those involve in business)]

11. Reason (s) for Extension: Medical (Please attach your medical report): _____

Others (Please specify): _____

Student's Signature

Date:

PART B

ENDORSEMENT BY FACULTY/ SCHOOL/ INSTITUTE

<u>THE SUPERVISOR/ ADVISOR</u>	
<input type="checkbox"/> Supported <input type="checkbox"/> Not Supported	
Thesis completion's percentage:	<input type="text"/> %
Comment (s) : _____	
_____	_____
Signature and Stamp	Date

<u>THE DEPUTY DEAN/ DEPUTY DIRECTOR AT FACULTY / SCHOOL / INSTITUTE</u>	
<input type="checkbox"/> Endorsed <input type="checkbox"/> Not Endorsed	
Comment (s) : _____	
_____	_____
Signature and Stamp	Date

PART C

APPROVAL BY SCHOOL OF GRADUATE STUDIES

<u>SCHOOL OF GRADUATE STUDIES</u>	
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
Graduate Review Committee :	
_____	_____
Signature and Stamp	Date