

APPLICATION TO DISCONTINUE SERVICE OF THESIS SUPERVISOR

FOR UUM COLLEGE OF BUSINESS PROGRAMMES

SECTION A: TO BE COMPLETED BY THE APPLICANT		
Name:	Matric No:	
Programme:	No. of Trimester:	
Tel. No.:	E-Mail:	
Mode of Study: * () Full-Time () Part-Time	Address:	
Title of Thesis/Research Paper/Project Paper:		
Progress of Research:		
Date of Colloquium:	Date of Proposal Defense:	
Current Supervisor(s):	Supervisor(s) to be discontinue:	
Main Supervisor:	Main Supervisor:	
Co-Supervisor:	Co-Supervisor:	
Reason to discontinue service (use additional paper if necessary)		
Signature:	Date:	

SECTION B: TO BE COMPLETED BY THE SUI	PERVISOR	
1. Main Supervisor (If applicable):		
() Agree () Disagree		
Comment:		
Signature & Stamp:		
Date:		
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2. Co-Supervisor (If applicable):		
() Agree () Disagree		
Comment:		
Signature & Stamp:		
Date:		
SECTION C: RECOMMENDED BY THE DEAN OF THE SCHOOL*		
() Recommended	Signature & Stamp:	
() Not Recommended		
	Date:	

SECTION D: APPROVAL BY THE DEAN OF OTHMAN YEOP ABDULLAH GRADUATE SCHOOL OF BUSINESS		
() Approved	Signature & Stamp:
() Disapproved	
() To be decided by the Appeal Committee	
		Date:

^{*} Tick √ wherever appropriate