



THESIS SUBMISSION NOTICE

PART A : (To be complete by the candidate)
[Please tick (✓) in the selected box]

Dean,
Centre for Graduate Studies (CGS)
No. 112 & 114 (First Floor)
Taman Pertiwi Indah, Jalan Kangar-Alor Setar
Seriab, 01000 Kangar,
Perlis

1) I, _____ a Full Time / Part

Time candidate for MSc / PhD in _____

hereby agree to submit eight (8) copies of my thesis within six (6) months from this date for evaluation.

2) **The title of my thesis is :**

3) **Candidate Personal Details :**

Name :		Matric Number :
Address (1) Permanent :		
(2) Mailing :		
Tel Number (Office) :		Tel Number (Mobile) :
Tel Number (Home) :		Fax Number :
Email :		

4) I hereby declare that the thesis is free from plagiarised work and ethically produced.

5) I hereby declare that I am not in any way related to the internal examiner and external examiner at the time of this appointment and should that happen at any time during my candidature period, the appointment shall be terminated.

Thank you.

.....
(Signature)

.....
(Date)

ACKNOWLEDGEMENT BY LEAD SUPERVISOR

Part B : (To be completed by Lead Supervisor)

[Please tick (✓) in the selected box]

1) I, _____ the Lead Supervisor for Mr./Mrs./Ms _____ MSc / PhD candidate;

2) I hereby acknowledged to have read his/her thesis and is satisfied with the progress that have been made. Therefore, I agree to his/her intention to submit eight (8) copies of his/her thesis within six (6) months from this date for evaluation.

3) I hereby declare that the thesis is free from plagiarised work, ethically produced and meet the quality and standard for the degree applied.

4) I hereby declare that the internal and external examiner at the time of this appointment are not related in any way, work and/or personal basis, to the candidate. Should any of that happen at any time during the student's candidature period, the appointment shall be terminated.

.....

(Signature and Official Stamp) **(Date)**

Co- Supervisor (if any)	1.	Comment:
	2.	Comment:
	3.	Comment:

Postgraduate Program Chairman's Comment

Recommended Not recommended

Signature & Stamp _____ Date _____

ACKNOWLEDGEMENT BY DEAN / DIRECTOR

Part C : (To be completed by School's Dean / Director)

Note : If the Dean / Director is the student's Lead Supervisor, the section should be completed by any other members in the School's Board)

1) I, Dean/Director, School/Institute of hereby agree to the acknowledgement made by the Lead and Co Supervisors stated in Part B.

2) The names of the Internal and External Examiners are as follows :

External Examiner	Internal Examiner
Name : _____ Address : _____ _____ Email : _____ Tel : _____ Fax : _____	Name : _____ Address : _____ _____ Email : _____ Tel : _____ Fax : _____
Name : _____ Address : _____ _____ Email : _____ Tel : _____ Fax : _____	Name : _____ Address : _____ _____ Email : _____ Tel : _____ Fax : _____

.....
(Signature and Official Stamp)

.....
(Date)

Examiners Appointment

1. For MSc & PhD candidate , one Internal and one External Examiner should be appointed.
2. For PhD candidate (UniMAP staff), two External Examiners should be appointed.
3. For Examiners first appointment, please attach a copy of his/her CV.
4. Please state Examiners recent address.
5. Please attach with the Abstract.