



RESEARCH PROPOSAL CORRECTION FORM

Please attached: Written report on the corrections undertaken (as per assessor's report).

Reminder: Please submit completed form to the Academic Management and Quality Assurance Division.

SECTION A: CANDIDATE'S DETAIL (COMPLETED BY STUDENT)

Name of Student		Matrix No.	
Programme			
Faculty			
Mobile Phone No.		Email Address	
Research Proposal Title			
Date of Proposal Defense			
Result of Proposal Defense			
Supervisor			
Co-Supervisor I (if any)			
Co-Supervisor II (if any)			

Student's Signature

Date

SECTION B: DECLARATION OF SUPERVISOR(S) AND EXAMINER(S)

We had confirmed that we have read and accepted the attached corrections. We had approved that this research proposal is satisfactory in the sense of its scope, quality and presentation and it fulfills the prerequisites for a Master/Ph.D. Proposal Defense.

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Main Supervisor Official Stamp & Signature
Date: _____

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Internal Examiner Official Stamp & Signature
Date: _____

SECTION C: VERIFICATION BY THE CHAIRMAN

I have checked the candidate's research proposal and hereby confirmed that the candidate has done all recommended corrections by the Proposal Defense Committee.

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Official Stamp & Signature
Date: _____

SECTION D: ACKNOWLEDGEMENT BY HEAD OF CLUSTER

I acknowledged the candidate's final submission of his/her research proposal.

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Official Stamp & Signature
Date: _____

SECTION E: ACADEMIC MANAGEMENT AND QUALITY ASSURANCE DIVISION

Please tick (✓) in the box provided:

<input type="checkbox"/>	Written report on the corrections undertaken (as per assessor's report).
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Received by:

Signature: _____

Officer's Name: _____

Date: _____