

**INSTITUT PENGAJIAN TERMAJU
UNIVERSITI MALAYA**

**INSTITUTE FOR ADVANCED STUDIES
UNIVERSITY OF MALAYA**

**PERMOHONAN PELANTIKAN/ PERTUKARAN PENYELIA/PENGGUGURAN PENYELIA/
PERUNDING / PERTUKARAN BIDANG PENYELIDIKAN
APPLICATION OF APPOINTMENT/ CHANGE FOR SUPERVISOR / TERMINATION OF SUPERVISOR/
CONSULTANT/ CHANGE FIELD OF RESEARCH**

Tandakan (✓) bagi yang berkenaan / Tick (✓) where applicable

PENYELIA TAMBAHAN / ADDITIONAL SUPERVISOR		PERUNDING / CONSULTANT		PERTUKARAN PENYELIA / CHANGE OF SUPERVISOR		PENGGUGURAN PENYELIA / TERMINATION OF SUPERVISOR
PERTUKARAN BIDANG PENYELIDIKAN (DIBAWAH BIDANG PENGAJIAN YANG SAMA) CHANGE OF FIELD OF RESEARCH (WITHIN THE SAME FIELD OF STUDY)						

BAHAGIAN A: DIISI OLEH CALON / SECTION A: TO BE COMPLETED BY CANDIDATE

1. BUTIRAN DIRI CALON / DETAILS OF CANDIDATE

Nama / Name:									
No Pendaftaran. / Registration no.:									
Program / Programme:									
Tajuk Tesis/Disertasi : Title of Thesis / Dissertation									
Bidang Penyelidikan / Field of Research:									
Kod NEC / NEC Code :									
No. Telefon / Telephone no.:					E-mail:				
Pencalonan Permulaan / Initial Registration	Sem:		Sesi/ Session:		Tempoh Maksimum Pencalonan / Max Period of Candidature:	Sem:		Sesi/ Session:	
Justifikasi Permohonan* Justification of application*:									
<p>*Nota : Sila kemukakan bukti bagi justifikasi yang diberikan * Note : Please provide evidence to the justification</p>									

2. RINGKASAN MAKLUMAT PENYELIAAN (PENYELIA DAN ASPEK PENYELIAAN)*SUMMARY OF SUPERVISION INFORMATION (SUPERVISOR AND SUPERVISION ASPECTS)*

Role:	Nama / Name : Jabatan / Department: Aspek / Aspect : <i>(reflect to student title/research)</i>	(KEKAL/TAMBAHAN/GUGUR) <i>(REMAIN/ ADDITIONAL / DROP)</i>
Role:	Nama / Name : Jabatan / Department: Aspek / Aspect : <i>(reflect to student title/research)</i>	(KEKAL/TAMBAHAN/GUGUR) <i>(REMAIN/ ADDITIONAL / DROP)</i>
Role:	Nama / Name : Jabatan / Department: Aspek / Aspect : <i>(reflect to student title/research)</i>	(KEKAL/TAMBAHAN/GUGUR) <i>(REMAIN/ ADDITIONAL / DROP)</i>
Role:	Nama / Name : Jabatan / Department: Aspek / Aspect : <i>(reflect to student title/research)</i>	(KEKAL/TAMBAHAN/GUGUR) <i>(REMAIN/ ADDITIONAL / DROP)</i>

***Nota / Note:**

1. Sila nyatakan alamat penuh dan lampirkan CV lengkap sekiranya penyelia yang dicadangkan bukan dari UM
Please provide full address and a complete CV if the proposed supervisor is not from UM.
2. Sila dapatkan persetujuan pelantikan terlebih dahulu daripada Penyelia sedia ada dan Penyelia baharu yang dicadangkan
Please obtain consent for appointment in advance from the current Supervisor and proposed Supervisor

BAHAGIAN B: DIISI OLEH SEDIA ADA DAN PENYELIA/PERUNDING TAMBAHAN
SECTION A: TO BE COMPLETED BY CURRENT SUPERVISOR AND ADDITIONAL OR PROPOSED SUPERVISOR/CONSULTANT

NAMA, TANDATANGAN, COP RASMI, TARIKH / NAME, SIGNATURE, OFFICIAL STAMP, DATE	BERSETUJU DENGAN PERMOHONAN CALON (YA/TIDAK) / AGREE WITH APPLICATION (YES/NO)	ULASAN / COMMENTS

3. TANDATANGAN CALON / SIGNATURE OF CANDIDATE

Tandatangan Calon / <i>Signature</i> :		Tarikh / <i>Date</i> :	
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(Borang yang dilengkapkan dikemukakan kepada Pejabat TDIT
(*Completed form to be submitted to Deputy Dean's office*))

BAHAGIAN C: KELULUSAN JAWATANKUASA LEMBAGA INSTITUT PENGAJIAN TERMAJU (LIPT)
SECTION C: APPROVAL BY BOARD OF INSTITUTE FOR ADVANCED STUDIES

Tarikh Mesyuarat / <i>Date of meeting</i>	
Kelulusan / <i>Approval</i>	DILULUSKAN / TIDAK DILULUSKAN <i>APPROVED / NOT APPROVED</i>
Alasan (jika permohonan tidak diluluskan) / <i>Reason (if application is not approved)</i> :	

