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and Innovat	•

INSTITUTE FOR POSTGRADUATE STUDIES

POSTGRADUATE PROGRAMME APPEAL OF RE-INSTATEMENT

The candidature shall be terminated if:

- (1) The candidate is not able to complete the programme within the maximum period.
- (2) The candidate conducts himself in such a manner that is deemed to contravene any Statute, Rule or Regulation of the University.
- (3) The candidate's project progress is unsatisfactory for three consecutive progress monitoring evaluations.
- (4) The candidate does not pay the required fees within a stipulated period.
- (5) The candidate is found guilty of examination offence.
- (6) The candidate fails on his third consecutive attempt within the maximum period of proposal defence or obtains the grade of 'US' beyond the maximum period of proposal defence, whichever is earlier (Structure A).
- (7) The students who are on PROBATION for 3 consecutive semesters shall be terminated.
 - A candidate shall be put under Probation status if upon 15 credit hours, the candidate's GPA in a trimester is below 2.00 (Structures B & C- Master level).
 - A candidate shall be put under Probation status if upon 24 credit hours, the candidate's GPA in a trimester is below 2.67 (Structures B & C- Master level).
 - A candidate shall be put under Probation status if upon 18 credit hours, the candidate's CGPA is below 2.00 for TWO consecutive semesters (Structure B- Doctoral level).
- (8) The payment of the re-instatement fee is payable upon approval of the appeal by Dean of IPS.

PART I: TO BE COMPLETED BY THE CANDIDATE (Please circle the relevant)					
FULL NAME:	ID NUMBER:				
PROGRAMME: <u>For Structure A</u> : M.Phil. (Mgmt.) / M.Eng.Sc. / M.Sc. (I.T.) / M.Sc. (C.M.) Ph.D. (Mgmt.) / Ph.D. (Eng.) / Ph.D. (I.T.) / Ph.D. (C.M.)	FACULTY: FOE/ FCI/ FCM/ FOM/ GSM/ FET/ FIST/ FOB				
For Structure B & C: M.Eng (Tele) / M.Eng (Micro) / M.Eng (Photonics) / M.Eng (Embedded System) / M.Eng(Advance Manufacturing Mgmt.) / MBA / DBA / MKM with Multimedia / MKM (E-Learning Tech.) / M.IT (Multimedia Comp.) / M.Comp.Sc. / M.IT (Info. Sys)					
CAMPUS: CYBERJAYA/MELAKA/PSDC/OTHERS	NATIONALITY:				
MODE OF STUDY: FULL TIME/ PART TIME	GENDER: MALE/FEMALE				
DATE OF INITIAL REGISTRATION:/ dd mm yr	END OF CANDIDATURE:// dd mm yr				
TITLE OF THESIS/DISSERTATION/PROJECT:					
TERMINATION DATE:// dd mm yr	1st / 2nd / 3rd /th RE-INSTATEMENT				



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REASON OF TERMINATION / POOR PROGRESS / LAPSE OF CANDIDATURE:							
PREVIOUSLY APPROVED EXTENSION (If any):							
NO.	FROM (DATE)	TO (DATE)	DURATION (MONTHS)	REASON			
JUSTIFICATION FOR APPEAL OF RE-INSTATEMENT:							
	ATION FOR APPEA	L OF RE-INSTAT	EIVIEN I : 				
SIGNATURE OF CANDIDATE: DATE: dd mm yr							
PART II (for Structure A only	/)· RECOMMEND.	ATION FROM SUPERVIS	OR AND CO-SUPERVISOR (Kindly tie	ck the appropriate)		
SUPERVI		y). RECOMMEND	ATION I ROW 301 ERVIS	ON AND CO-SOI ERVISOR (KING) IN	ск те арргорпате,		
RECOMMENDED NOT RECOMMENDED							
SUPERVISOR'S COMMENTS (If any):							
NAME OF	NAME OF CUREDWOOD						
	NAME OF SUPERVISOR: SIGNATURE AND OFFICIAL STAMP: DATE:						
DITTE							
CO-SUPE	<u>CO-SUPERVISOR</u>						
RECOMMENDED NOT RECOMMENDED							
CO-SUPERVISOR'S COMMENTS (If any):							
NAME OF	NAME OF CO-SUPERVISOR: SIGNATURE AND OFFICAL STAMP:						
DATE:	DATE:						

Institute for Postgraduate Studies Multimedia University (436821-T) Cyberjaya Campus: 63100 Cyberjaya, Selangor Darul Ehsan, Malaysia Tel: 603-83125276/5292/5133 Fax: 603-83125300 Melaka Campus: Jalan Ayer Keroh Lama, 75450 Melaka, Malaysia Tel: 606-2523564 Fax: 606-2317141

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DADT III. FOD FACILI TYLICE	
PART III: FOR FACULTY USE Pacammondation/Commonts by Faculty Doan:	
Recommendation/Comments by Faculty Dean: Reinstatement is recommended/not recommended (Please provide justification for recommendation)	
Signature and Stamp	Date:
Decision by Dean of IPS: Reinstatement is approved/not approved (Please provide justification for recommendation)	
Signature and Stamp	Date:
PART IV - PAYMENT OF THE RE-INSTATEMENT FEE - To be co I confirm that I have received the extension of candidature fee of: * RM500.00	mpleted by the Finance Division.
Endorsed by:	
Name:	Signature:
Designation:	Date:
PART IV: FOR INSTITUTE FOR POSTGRADUATE STUDIES USE Received and Verified by IPS Manager:-	
NAME:	SIGNATURE AND OFFICIAL STAMP:
DATE:	

