MULTIMEDIA UNIVERSITY

INSTITUTE FOR POSTGRADUATE STUDIES

POSTGRADUATE PROGRAMME
APPLICATION FOR CHANGE OF SUPERVISION ARRANGEMENT

1. The candidate is required to obtain the recommendation from the Supervisors.
2. The candidate shall submit the form to the faculty.

PART I: TO BE COMPLETED BY THE CANDIDATE	
FULL NAME:	ID NUMBER:
PROGRAMME:	FACULTY:
MODE OF STUDY:	NATIONALITY:
PERSONAL EMAIL:	MOBILE PHONE NO.:
DATE OF INITIAL REGISTRATION:	END OF CANDIDATURE:
CORRESPONDENCE ADDRESS:	

PART II: CHANGE OF SUPERVISION ARRANGEMENT

(Please tick (✓) the relevant)

APPLY CHANGE OF SUPERVISION ARRANGEMENT FOR:

	SUPERVISOR		CO-SUPERVISOR

REASON FOR CHANGE: _____

_____

SIGNATURE OF CANDIDATE: _____ DATE:_____

I) CHANGE OF SUPERVISOR

CURRENT SUPERVISOR : _____

PROPOSED NEW SUPERVISOR : _____

NUMBER OF STUDENTS CURRENTLY SUPERVISED BY PROPOSED NEW SUPERVISOR *(applicable for Structure A only)*:

i) AS SUPERVISOR		PhD		Master
ii) AS CO-SUPERVISOR		PhD		Master

Institute for Postgraduate Studies
Multimedia University (436821-T)
Cyberjaya Campus: 63100 Cyberjaya, Selangor Darul Ehsan, Malaysia
Tel: 603-83125276/5182/5560/5326
Melaka Campus: Jalan Ayer Keroh Lama, 75450 Melaka, Malaysia
Tel: 606-2523564/3824/3166
Url: http://www.mmu.edu.my

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NUMBER OF STUDENTS CURRENTLY SUPERVISED BY PROPOSED NEW SUPERVISOR *(applicable for Structure B & C only)*:

i) NEW	☐	iii) IN PROGRESS	☐
ii) COMMENCING	☐	iv) FINISHING	☐

Signature and official stamp of current supervisor : _____ Date: ___/___/_____
dd mm yr

Signature and official stamp of new supervisor : _____ Date: ___/___/_____
dd mm yr

II) CHANGE OF CO-SUPERVISOR *(applicable for Structure A only)*

CURRENT CO-SUPERVISOR: _____

PROPOSED NEW CO-SUPERVISOR: _____

NUMBER OF STUDENTS CURRENTLY SUPERVISED BY PROPOSED NEW CO-SUPERVISOR:

i) AS SUPERVISOR	☐	PhD	☐	Master
ii) AS CO-SUPERVISOR	☐	PhD	☐	Master

Signature and official stamp of current co-supervisor : _____ Date: ___/___/_____
dd mm yr

Signature and official stamp of new co-supervisor : _____ Date: ___/___/_____
dd mm yr

PART III: FOR FACULTY USE		
RECOMMENDATION FROM THE DEAN OF FACULTY Recommended/ Not Recommended		
FACULTY Received and Verified		
PART IV: FOR INSTITUTE FOR POSTGRADUATE STUDIES USE		
INSTITUTE FOR POSTGRADUATE STUDIES Received and Verified		

Note:

(1) The Faculty shall send the form to IPS after the Faculty R&I Committee Meeting.

(2) The Senate shall consider the Change of Supervision Arrangement upon recommendation from the Faculty R&I Committee through the Board of Postgraduate Studies.

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