GSGSG/2024/11



## APPLICATION FOR ADDITIONAL SUPERVISOR

SECTION A: TO BE COMPLETED BY THE CANDIDATE		
Name:	Matric No.:	
Programme:	Number of Semester:	
Tel. No.:	E-Mail:	
Mode of Study:*	Address:	
( ) Part-time ( ) Full-time		
Research Title:		
Progress of Research		
Colloquium: ( ) Yes ( ) No		
Proposal Defense: ( ) Yes ( ) No		
Current Supervisor:	Proposed Additional Supervisor:	
Main Supervisor:	Co-Supervisor:	
Reason for additional supervisor (use additional paper if necessary):		
Signature:	Date:	

SECTION B: TO BE COMPLETED BY CURRENT SUPERVISOR *		
Main Supervisor:		
I, ( ) Agree / ( ) Disagree with the additional supervisor for the student.		
Proposed additional supervisor:		
Reason for nomination of additional supervisor:		
Name:		
Date:		
Signature & Stamp:		
SECTION C: TO BE COMPLETED BY THE PROPOSED ADDITIONAL SUPERVISOR*		
I, ( ) Agree / ( ) Disagree to act as a supervisor for the above student.		
Comments:		
Name:		
Date:		
Signature & Stamp:		

SECTION D: RECOMMENDATION BY THE PROGRAMME CHAIR*			
(	) Recommended	Date:	
(	) Not Recommended	Signature & Stamp:	
SECTION E: RECOMMENDATION BY THE DEAN OF THE SCHOOL*			
(	) Recommended	Date:	
(	) Not Recommended	Signature & Stamp:	
SECTION F: APPROVAL BY THE DEAN OF GSGSG*			
(	) Approved	Date:	
(	) Disapproved	Signature & Stamp	
* T	ick √ wherever appropriate	2024	