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Universiti Utara Malaysia

GSGSG/2016/12

APPLICATION TO DISCONTINUE SERVICE OF THESIS SUPERVISOR

SECTION A: TO BE COMPLETED BY THE CANDIDATE

Name:	Matric No.:
Programme:	Number of Semester:
Tel. No.:	E-Mail:
Mode of Study:* () Part-time () Full-time	Address:
Research Title:	
Progress of Research:	
Date of Colloquium:	
Date of Proposal Defense:	
Current Supervisor:	Supervisor to be discontinued:
Main Supervisor:	Main Supervisor:
Co-Supervisor:	Co-Supervisor:
Reason to discontinue service (use additional paper if necessary):	
Signature:	Date:

SECTION B: TO BE COMPLETED BY THE SUPERVISOR

1. Main Supervisor:

() Agree

() Disagree

Comment:
.....
.....

Name:

Date:

Signature & Stamp:

2. Co-Supervisor:

() Agree

() Disagree

Comment:
.....
.....

Name:

Date:

Signature & Stamp:

SECTION C: RECOMMENDATION BY THE PROGRAMME COORDINATOR*

() Recommended

Date:

() Not Recommended

Signature & Stamp:

SECTION D: RECOMMENDATION BY THE DEAN OF THE SCHOOL*

() Recommended

Date:

() Not Recommended

Signature & Stamp:

SECTION E: APPROVAL BY THE DEAN OF GSGSG*

() Approved

Date:

() Disapproved

Signature & Stamp

Or

() To be decided by the Appeal
Committee

* Tick wherever appropriate