



## VERIFICATION OF PLAGIARISM CHECKING

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STUDENT INFORMATION	
Full Name :	
Student Number :	Phone Number :
Email :	
Title :	
Please use BLOCK CAPITAL LETTERS to fill in the form.	

COLLEGE & SCHOOL											
CAS	Awang Had Salleh Graduate School of Arts and Sciences (AHSGS)										
COLGIS	Ghazali Shafie Graduate School of Government (GSGSG)										
COB	OYAGSB	SBM	TISSA	SEFB	STML	IBS					
THE ORIGINALITY IS DONE OF THE PURPOSE OF:											
Proposal Defense				Pre-VIVA				VIVA			
Correction Done After VIVA				Research Paper (For Master Student)							
Please tick (X) the relevant box as appropriate.											

SIGNATURE & OFFICIAL STAMP	
I am pleased to inform that I am fully satisfied with the proposal/dissertation/thesis/research paper submitted by above candidate and can be submitted to the library for <b>certifying the originality</b> of the said proposal/dissertation/thesis/research paper.	
Signature & Official Stamp (Main Supervisor)	Signature & Official Stamp (Co Supervisor)
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\*\* NOTE : Results will be notified through email within 3 WORKING DAYS.