



Ghazali Shafie
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Universiti Utara Malaysia

GSGSG/2016/13

**APPLICATION FOR
WITHDRAWAL FROM
SUPERVISION
(for supervisor only)**

SECTION A: TO BE COMPLETED BY SUPERVISOR

Name:	Staff No.:
Tel. No. : Office: Mobile:	E-mail:
Student Name:	Student Matric No.
Research Title:	
Reason to withdraw from supervision (use additional paper if necessary):	
Proposed Supervisor:	
Date:	Signature:

SECTION B: RECOMMENDATION BY THE PROGRAMME COORDINATOR*

() Recommended	Date:
() Not Recommended	Signature & Stamp:

SECTION C: RECOMMENDATION BY THE DEAN OF THE SCHOOL*

() Recommended / () Not Recommended

Comment:

Date:

Signature & Stamp:

SECTION C : APPROVAL BY THE DEAN OF GGSGS*

() **Approved**

() **Disapproved**

Or

() **To be decided by the Appeal
Committee**

Date:

Signature & Stamp

* Tick wherever appropriate