



**PERKHIDMATAN UTAMA
SISWAZAH**

**PEJABAT TIMBALAN NAIB CANSOLOR
(AKADEMIK & ANTARABANGSA)**

Kod Dokumen: PU/S/BR02/GS-10b

**PENAMAAN SEMULA JAWATANKUASA PENYELIAAN
RECONSTITUTION OF SUPERVISORY COMMITTEE**

BAHAGIAN A **UNTUK DILENGKAPKAN OLEH PELAJAR**
PART A **TO BE COMPLETED BY STUDENT**

1. **Nama Penuh:**
Full Name: _____
2. **No. Matrik:**
Matric No.: _____
3. **Bil. Semester:**
Semester No.: _____
4. **Program:**
Programme: _____
5. **Bidang Pengajian:**
Field of Study: _____
6. **Fakulti/Institut:**
Faculty/Institute: _____
7. **Status:**
Status: _____
8. **PNGK:**
CGPA: _____
9. **Tajuk Penyelidikan:**
Research Title: _____

10. **Ahli Jawatankuasa Penyeliaan semasa:**
Current Members of Supervisory Committee:

Ahli Jawatankuasa Penyeliaan <i>Members of Supervisory Committee</i>	Tandatangan <i>Signature</i>	Ahli Jawatankuasa Penyeliaan yang Digugurkan (V) <i>Member of Supervisory Committee that has been Dropped (V)</i>
Pengerusi : <i>Chairman</i> Ahli 1 : <i>Member 1</i> Ahli 2 : <i>Member 2</i> Ahli 3 : <i>Member 3</i> Ahli 4 : <i>Member 4</i>		

11. **Sebab Penamaan Semula:**

Reason for Reconstitution:

Bertukar bidang pengajian

Change field of study

Bertukar fakulti (pelajar atau Ahli Jawatankuasa Penyeliaan)

Transfer of faculty (either student or Supervisory Committee Member)

Ahli lama menarik diri

Withdrawal of old member

Ahli lama bersara/tidak lagi berkhidmat dengan UPM

Old member retired/no longer in service with UPM

Ahli tambahan adalah diperlukan

Additional member required

Lain-lain (sila nyatakan):

Others (please specify):

12. **Cadangan Penamaan Semula Ahli Jawatankuasa Penyeliaan:**

Proposed Reconstitution of Members of Supervisory Committee:

CHAIRMAN	Bil. Pelajar Semasa yang Diselia <i>(Current No. of Students Being Supervised)</i>				Tandatangan dan Cap Rasmi <i>Signature and Official Stamp</i>
	PhD		Master		
	C	M	C	M	
Nama : <i>Name</i> Pengkhususan : <i>Specialization</i> Jabatan : <i>Department</i> Fakulti/Institut : <i>Faculty/Institute</i> No. Telefon : <i>Phone No.</i> No. Faks : <i>Fax. No.</i> E-mel : <i>E-mail</i>					

<u>INTERNAL MEMBER</u>	Bil. Pelajar Semasa yang Diselia <i>(Current No. of Students Being Supervised)</i>				Tandatangan dan Cap Rasmi <i>Signature and Official Stamp</i>
	PhD		Master		
	C	M	C	M	
Nama : <i>Name</i> Pengkhususan : <i>Specialization</i> Jabatan : <i>Department</i> Fakulti/Institut : <i>Faculty/Institute</i> No. Telefon : <i>Phone No.</i> No. Faks : <i>Fax No.</i> E-mel : <i>E-mail</i>					

<u>INTERNAL MEMBER</u>	Bil. Pelajar Semasa yang Diselia <i>(Current No. of Students Being Supervised)</i>				Tandatangan dan Cap Rasmi <i>Signature and Official Stamp</i>
	PhD		Master		
	C	M	C	M	
Nama : <i>Name</i> Pengkhususan : <i>Specialization</i> Jabatan : <i>Department</i> Fakulti/Institut : <i>Faculty/Institute</i> No. Telefon : <i>Phone No.</i> No. Faks : <i>Fax No.</i> E-mel : <i>E-mail</i>					

Bukan Kakitangan UPM (Non-UPM Staff)

<u>EXTERNAL MEMBER</u>	Bil. Pelajar Semasa yang Diselia <i>(Current No. of Students Being Supervised)</i>				Tandatangan dan Cap Rasmi <i>Signature and Official Stamp</i>
	PhD		Master		
	C	M	C	M	
Nama : <i>Name</i> Pengkhususan : <i>Specialization</i> Alamat Pejabat : <i>Office Address</i> No. Telefon : <i>Phone No.</i> No. Faks : <i>Fax No.</i> E-mel : <i>E-mail</i>					

EXTERNAL MEMBER	Bil. Pelajar Semasa yang Diselia <i>(Current No. of Students Being Supervised)</i>				Tandatangan dan Cap Rasmi <i>Signature and Official Stamp</i>
	PhD		Master		
	C	M	C	M	
Nama : <i>Name</i> Pengkhususan : <i>Specialization</i> Alamat Pejabat : <i>Office Address</i> No. Telefon : <i>Phone No.</i> No. Faks : <i>Fax. No.</i> E-mel : <i>E-mail</i>					

(**C**: Chairman, **M**: Member)

Tandatangan Pelajar
Signature of Student

Tarikh
Date

**BAHAGIAN B
PART B**

**PENGESAHAN FAKULTI/INSTITUT
ENDORSEMENT OF THE FACULTY/INSTITUTE**

Pengesahan Penyelaras Pengajian Siswazah Fakulti/Institut:

Endorsement of the Faculty/Institute's Coordinator of Graduate Studies:

Disahkan
Endorsed

Tidak Disahkan
Not Endorsed

Tandatangan dan Cap Rasmi
Signature and Official Stamp

Tarikh
Date

**BAHAGIAN C
PART C**

**UNTUK KEGUNAAN SEKOLAH PENGAJIAN SISWAZAH
FOR SCHOOL OF GRADUATE STUDIES USE**

Kelulusan Jawatankuasa Pengajian Siswazah Universiti:

Approval of University Graduate Studies Committee:

Diluluskan
Approved

Tidak Diluluskan
Not Approved

Bil. Mesyuarat JKPSU:

JKPSU Meeting No: _____

Tarikh:

Date: _____