

**CENTRE FOR POSTGRADUATE STUDIES**  
**NOTIFICATION OF INTENTION TO SUBMIT RESEARCH WORK**  
**SEMESTER ..... SESSION .....**

**INSTRUCTIONS**

**To student**

1. Please complete Section A and submit this form to the Deputy Dean (Research & Postgraduate) of your Kulliyah/Institute.
2. A master student intending to submit his/her research should notify the Kulliyah Postgraduate Office three months before the intended date of submission.
3. A doctoral candidate should submit this notification at least four months before the intended date of submission.

**NOTE:** If you have any changes in your personal particulars (such as e-mail address & mobile phone number), please go to <http://itdportal.iium.edu.my/anr/pgbio/> to update your biodata.

**To Supervisor (s)**

1. Please complete Section B and submit the form to the Deputy Dean (Research & Postgraduate) of your Kulliyah/Institute.
2. Please nominate:
  - a) TWO EXTERNAL and ONE INTERNAL examiners for your supervisee (for PhD)
  - b) ONE EXTERNAL and ONE INTERNAL examiners for your supervisee (for Master)

**To Deputy Dean (Research & Postgraduate) / Head of Department of the Kulliyah/Institute**

Please complete Section C and forward the form to the Dean, Centre for Postgraduate Studies.

**SECTION A: TO BE COMPLETED BY THE STUDENT**

1. Name:	2. Matric No :
3. Programme:	4. Telephone No :
4. Thesis Title (English/Arabic):	
In accordance with the provisions of Section 16.1 and 17.1, Postgraduate Policies and Regulations, I give notice of my intention to submit the completed research work for examination on ..... (day/month/year)	
_____ Signature	_____ Date

**SECTION B: TO BE COMPLETED BY THE SUPERVISOR(S)**

Name of Main Supervisor:	
Agree <input type="checkbox"/>	Disagree <input type="checkbox"/>
Comment (s): .....	
_____ Signature and Official Stamp	_____ Date

Name of Co-Supervisor (if any):	
Agree <input type="checkbox"/>	Disagree <input type="checkbox"/>
Comment (s): .....	
.....	
_____	_____
Signature and Official Stamp	Date

**SECTION C: CONFIRMATION BY THE HEAD OF DEPARTMENT AND/OR DEPUTY DEAN (RESEARCH & POSTGRADUATE) ON THE INTENTION TO SUBMIT THE RESEARCH**

The student's intention to submit his/her research is noted.	
<b>To be completed by the Head of Department</b>	<b>To be completed by the Deputy Dean (Research &amp; Postgraduate)</b>
_____	_____
Signature and Official Stamp	Signature and Official Stamp
Date	Date

**OFFICE USE (CENTRE FOR POSTGRADUATE STUDIES)**

Date Received	Action / Remarks