



NOTICE OF DISSERTATION SUBMISSION

Section A: (To be completed by the student)

Dean
School of Educational Studies
Universiti Sains Malaysia
11800 USM, Pulau Pinang

Notice of Dissertation Submission

I, (Name), Matric No. a Master of Arts (Education) via Mixed-Mode student will be submitting five (5) draft copies of my dissertation to be examined **one (1) month** after the date of this notice. The dissertation title is:-

Title:

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Translation:

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My personal particulars are as follows:

Name:	
Address:	
.....	Postcode:
Hand Phone No:	Email:

.....
(Signature)

.....
(Date)

LKM 100 course registration (for International students only): <input type="checkbox"/> Completed / Grade <input type="checkbox"/> Not completed	Endorsement by School: Staff's Signature: Staff's Name: Date:
Pre-requisite course(s) registration (if any): <input type="checkbox"/> Completed <input type="checkbox"/> Not completed	

ENDORSEMENT BY MAIN SUPERVISOR

Section B: (To be completed by the Main Supervisor)

I Main Supervisor for a Master of Arts (Education) via Mixed-Mode student, certify his/her intention to submit five (5) draft copies of the dissertation for examination.

In this regards, I hereby **endorse / do not endorse** the progress achieved by the student and have no objections / object to the intention to submit the draft copies of dissertation for examination one (1) month after the date of this notice.

.....
(Signature)

.....
(Date)

ENDORSEMENT BY DEAN/DIRECTOR OF SCHOOL/CENTRE/INSTITUTE

Section C: (To be completed by the Dean/Director of School/Centre/Institute)

I Dean, School of Educational Studies hereby endorse the recommendations made by the Main Supervisor as stipulated in Section B above.

The School has recommended the appointment of the following Internal Examiners:

Internal Examiner	Internal Examiner
Name: Address: Postcode: Tel.: Fax: Email: Obtained Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name: Address: Postcode: Tel.: Fax: Email: Obtained Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No
Internal Examiner (Reserve)	
Name: Address: Postcode: Tel.: Fax: Email: Obtained Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No	

.....
(Signature and Stamp)

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(Date)