INTENT TO SUBMIT GRADUATE THESIS

To

**Dean (Awang Had Salleh Graduate School of Arts and Sciences)**

**UUM College of Arts and Sciences**

**Universiti Utara Malaysia**

**06010 Sintok**

**Kedah**

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| **PART I** | ***(to be filled up by the student)*** |

I intend to submit my thesis to be examined within 3 months.

Name of Student:

Matric No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ H/P:

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Programme of Study: Ph.D

 Master’s

Thesis title:

*NOTE: PLEASE PROVIDE YOUR THESIS ABSTRACT*

**PART II** **(*to be filled up by the PhD student only)***

*(Applicable for a student who has registered from semester AR111/SEPTEMBER 2011/2012)*

Publication

(*Please tick (√) either option A or option B*)

Option A:

1. At least one (1) article is accepted for publication in ISI or Scopus Journal

**and**

1. At least one (1) article is under review for publication in a refereed journal

Option B:

1. Two (2) articles are published in refereed journal(s).

(*Please tick (√)* *(Applicable for a student who has registered from semester AR171 SEPTEMBER 2017/2018)*

At least one (1) article, accepted/published for publication in a Scopus Indexed Journal

Details of publication:

1. Title of article:

1. ­­­­­­­­­­­­­Publisher:
2. Year published:
3. Volume:
4. Page :
5. Issue :
6. Name of Journal :

1. Indexed by: Scopus ISI

 Others:

1. Remarks:

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1. Title of article:

1. ­­­­­­­­­­­­­Publisher:
2. Year published:
3. Volume:
4. Page :
5. Issue :
6. Name of Journal :
7. Indexed by: Scopus ISI

 Others:

1. Remarks:

Note: Please enclosed publication evidence

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| **PART III** | ***(to be filled up by the main supervisor)*** |

I hereby nominate the examiners as details below:

**(Please attach CVs of the examiners)**

**EXTERNAL EXAMINERS**

1. Name:

Address (Office):

Telephone/Handphone: \_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No.: \_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name:

Address (Office):

Telephone/Handphone: \_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No.: \_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INTERNAL EXAMINERS**

1. Name:

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_College:

Ext. No: \_\_\_\_\_\_\_\_\_\_\_\_\_ H/P: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name:

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_College:

Ext. No:\_\_\_\_\_\_\_\_\_\_\_\_\_ H/P: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The candidate has/has not fulfilled the requirement for publication. I am satisfied with his/her progress and have no objection regarding his/her intention.

*Signature and Official Stamp (Supervisor) Date*

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| **PART IV** | ***[to be completed by the Dean (School)]*** |

I hereby nominate the examiners as details below:

**(Please attach CVs of the examiners)**

**EXTERNAL EXAMINERS**

1. Name:

Address (Office):

Telephone/Mobile No: \_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No.: \_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name:

Address (Office):

Telephone/Mobile No: \_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No.: \_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INTERNAL EXAMINERS**

1. Name:

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_College:

Ext. No: \_\_\_\_\_\_\_\_\_\_\_\_\_H/P: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name:

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_College:

Ext. No:\_\_\_\_\_\_\_\_\_\_\_\_\_ H/P: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Signature and Official Stamp Date*

 *[Dean (School)]*

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| **PART V** | ***[to be filled up by Dean (AHSGS)]***  |

Internal Examiners: i.

 ii.

External Examiners: i.

 ii.

 *Signature and Official Stamp Date*

 *Dean ((AHSGS)*

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| **PART VI** | ***(for Office Use Only)*** |

Date Received:

Date of Appointment of the Examiners:

Date Thesis Submitted to the Examiners:

Date of VIVA: