



.....**BORANG RAYUAN UNTUK PELANJUTAN TEMPOH MAKSIMUM PENCALONAN**
.....**(Sila rujuk Garis Panduan Rayuan yang terlampir)**
APPEAL TO EXTEND MAXIMUM PERIOD OF CANDIDATURE
(Please refer to the attached guidelines)

Kepada: 8 Y_Ub

To: Fakulti Sains Komputer & Teknologi Maklumat
Universiti Malaya
Dean
Faculty of Computer Science & Information Technology
University of Malaya

BAHAGIAN A – Diisi oleh Calon
PART A – To be completed by the Candidate

Nama Calon: _____
Name: _____
Program: _____
Programme: _____

No. Matrik: _____
Matric No: _____

Permulaan
Pencalonan: Semester: _____ Sesi : _____ Tamat tempoh
Commencement Semester: _____ Session: _____ Maksimum Semester : _____ Sesi : _____
of Candidature: End of maximum
Period of
Candidature

Justifikasi Permohonan:
(Sila kemukakan bukti
seperti sijil perubatan
dsb.): _____
Justification (Please
enclose related
documents as proofs e.g.
–Medical Certificates
etc.): _____

Tandatangan: _____
Signature: _____

Tarikh: _____
Date: _____

BAHAGIAN B – Diisi oleh: Penyelia (bagi calon secara Penyelidikan# cX^WUa di fUb!a Yb[]_i h]_ca dcbYb dYbnY^]X]_Ub)

PART B – To be completed by: Supervisor (for candidates by research/mixed mode-taking research component)

PERAKUAN: Disokong/Tidak Disokong* dilanjutkan tempoh maksimum pencalonan .
RECOMMENDATION: I support/ do not support* extending maximum period of candidature.

Ulasan Lain (jika ada) : _____
Comments (if any): _____

Tandatangan : _____
Signature: _____

Tarikh : _____
Date: _____

Nama: _____
Name: _____

Cop Rasmi:
Official Stamp:

BAHAGIAN C – Diisi oleh Timbalan Dekan (Ijazah Tinggi)
PART C – To be completed by the Deputy Dean (Postgraduate)

Saya **MEMPERAKUKAN/TIDAK MEMPERAKUKAN*** dilanjutkan tempoh maksimum pencalonan

*I hereby **RECOMMEND/DO NOT RECOMMEND*** extending maximum period of candidature.*

Ulasan Lain (jika ada) :Comments (if any): _____

Tandatangan : _____
Signature:

Tarikh : _____
Date:

Nama: _____
Name:

Cop Rasmi:
Official Stamp:

BAHAGIAN D –Diisi oleh Dekan
PART D - To be completed by the Dean

Sila tandakan (✓) pada ruang berkenaan
Please tick (✓) in the appropriate box

Diluluskan
Approved

Tidak diluluskan
Not Approved

Ulasan Lain (jika ada) : _____
Comments (if any):

Tandatangan : _____
Signature:

Tarikh : _____
Date:

Nama: _____
Name:

Cop Rasmi:
Official Stamp:

* Sila potong mana yang tidak berkenaan.
*Delete whichever is not applicable