



**PERMOHONAN PENARIKAN DIRI DARI SEMESTER**  
**(Untuk semua program pascasiswazah kecuali program klinikal)**  
**WITHDRAWAL FROM SEMESTER**  
**(For all postgraduate programmes other than clinical programmes)**

Sila pastikan borang ini diisi dengan lengkap sebelum menyerahkannya kepada Dekan Fakulti bersama dengan surat sokongan/keterangan rasmi daripada pihak berkenaan.

*Please ensure the form is complete before submitting it to the Dean of Faculty together with the letter of support/official statement from the relevant parties.*

**BAHAGIAN A – Diisi oleh Calon**  
**PART A – To be completed by candidate**

Nama Calon: \_\_\_\_\_ No. Matrik: \_\_\_\_\_  
*Candidate Name: \_\_\_\_\_ Matric No: \_\_\_\_\_*

Program: \_\_\_\_\_ Fakulti/Akademi/  
*Programme: \_\_\_\_\_ Institut/Pusat: \_\_\_\_\_*  
*Faculty/Academy/ Institute/Centre:*

Saya ingin memohon untuk menarik diri daripada semester:  
*I wish to withdraw from semester :*

Semester: \_\_\_\_\_ Sesi: \_\_\_\_\_  
*Semester: \_\_\_\_\_ Session: \_\_\_\_\_*

Alasan: \_\_\_\_\_  
*Reason: \_\_\_\_\_*

Saya pernah/tidak pernah\* diluluskan penarikan diri dari semester.  
*I have been/have not been\* given approval for withdrawal from Semester:*

Jika pernah sila nyatakan tempoh yang telah diambil:  
*If you have been given approval, please state the period concerned:*

(i) Semester/Sesi \_\_\_\_\_ (ii) Semester/Sesi \_\_\_\_\_  
*Semester/Session \_\_\_\_\_ Semester/Session \_\_\_\_\_*

(iii) Semester/Sesi \_\_\_\_\_ (iv) Semester/Sesi \_\_\_\_\_  
*Semester/Session \_\_\_\_\_ Semester/Session \_\_\_\_\_*

Tandatangan: \_\_\_\_\_ Tarikh: \_\_\_\_\_  
*Signature: \_\_\_\_\_ Date: \_\_\_\_\_*

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**BAHAGIAN B - Diisi oleh: Penyelia (bagi calon secara penyelidikan)/**  
**Timbalan Dekan/Timbalan Pengarah Ijazah Tinggi (bagi calon secara kursus)**  
**PART B - To be completed by:**  
**Supervisor (for candidates by research)/**  
**Deputy Dean/Deputy Director Higher Degree (for candidates by coursework)**

**PERAKUAN:** Disokong/Tidak Disokong\* untuk Penarikan Diri daripada Semester  
**RECOMMENDATION:** *I support/do not support\* For withdrawal from Semester*

Ulasan (jika ada): \_\_\_\_\_  
*Other comments (if any): \_\_\_\_\_*

Tandatangan: \_\_\_\_\_ Tarikh: \_\_\_\_\_  
*Signature: \_\_\_\_\_ Date: \_\_\_\_\_*

Nama: \_\_\_\_\_ Cap Rasmi: \_\_\_\_\_  
*Name: \_\_\_\_\_ Official Stamp: \_\_\_\_\_*

\* Potong yang mana tidak berkenaan.  
*Delete whichever is not applicable.*