**POTENTIAL SUPERVISOR NOMINATION FORM**

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| **1. STUDENT’S PARTICULARS** |
| **Name** |  |
| **NRIC / Passport No.** |  | **Matrix No.** |  |
| **Hand Phone No.** |  | **Session/Semester** |  |
| **Email Address** |  | **Mode of Study** |  |
| **Research Interests** |  |
| **2. SUPERVISOR NOMINATION** |
| **For office use only** |  |  | **SUPERVISOR 1** |
|  | **Approved** | **Name** |  | **Stamp & Signature** |  |
|  |  | **SUPERVISOR 2** |
|  | **Approved** | **Name** |  | **Stamp & Signature** |  |
|  |  | **SUPERVISOR 3** |
|  | **Approved** | **Name** |  | **Stamp & Signature** |  |
| **3. VERIFICATION BY PROGRAM COORDINATOR** |
| **Date** |  | **Stamp & Signature** |  |