



Dean's Office
Faculty of Engineering
Universiti Malaysia Sarawak
Tel: +6082-583330

Request for Thesis Proposal Defense Form

Name of student:	Degree /Program :
Email and Tel.:	Date of registration:
Name of supervisor :	Names of co-supervisors:
Thesis title:	

Scheduled defense day, date and time :,/...../.....,am/pm

Venue : **Online Presentation (Medium:)**

The Supervisor and committee signed below have received the thesis proposal report and agree that the student will conduct the thesis proposal defense on the scheduled date, time and venue.

Supervisor		Chair of the committee	
Name	Signature and date	Name	Signature and date
Committee member 1		Committee member 2	
Name	Signature and date	Name	Signature and date

Signature of the student and date

Signature of the Dean/ Postgraduate
(Research) Coordinator and date

Note: The student should submit the form three weeks before the scheduled date to the Dean's office or to the Postgraduate (Research) Coordinator along with one hardcopy of thesis proposal report.