



INSTITUTE OF POSTGRADUATE STUDIES  
UNIVERSITI SAINS MALAYSIA

RE-SUBMISSION DRAFT COPIES OF THESIS FOR RE-EXAMINATION

Section 1 (To be completed by Student)

Fullname : \_\_\_\_\_

Matric No : \_\_\_\_\_ Degree Program : \_\_\_\_\_

*eg : Doctor of Philosophy ;  
Master of Science (Botany)*

Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode : \_\_\_\_\_

Telephone No.

House : \_\_\_\_\_

Mobile Phone : \_\_\_\_\_

Office No. : \_\_\_\_\_

Fax. No : \_\_\_\_\_

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

Thesis's Title :

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Translation :

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**ENDORSEMENT BY MAIN SUPERVISOR OF CORRECTIONS / AMENDMENTS  
MADE TO THE THESIS**

**Section 2 (To be completed by Main Supervisor)**

Supervisor's Name : .....
School / Centre / Institute : .....
I have examined the thesis of Mr./Mrs./Ms. : .....

I hereby confirm that :-

I am satisfied with the progress achieved by the candidate in terms of quality of the work presented and therefore have no hesitation in recommending that the thesis be submitted for examination.

I do not agree that the thesis be submitted for examination; and

Other comments on the submission of thesis (if any) :  
.....  
.....

..... (Main Supervisor's Signature & Stamp) ..... (Date)

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**ENDORSEMENT BY DEAN / DIRECTOR OF SCHOOL / CENTRE / INSTITUTE**

**Section 3 (To be completed by Dean / Director of School / Centre / Institute)**

I, ..... Dean / Director of the  
School / Centre / Institute ..... hereby :-

(i) Endorse the recommendations made by the Main Supervisor as stipulated in Section 2 above.

(ii) Endorse (if do not agree with the recommendations made by the Supervisor)  
.....  
.....

..... (Signature of Dean / Director & Stamp) ..... (Date)

