



EXIT FORM FOR POSTGRADUATE CANDIDATE
(For Research students only. This form must be completed before final submission of the hard cover thesis/dissertation)

Name of student:	Sign	Matri c No.:
Department:		
Name of Supervisor 1:	Sign	
Name of Supervisor 2 (if any) :	Sign	
Name of Supervisor 3 (if any) :	Sign	
Date of application:		

To ensure that the completion of this study is organized in a good order, your cooperation is requested to ensure that the following matters are settled before leaving the Faculty:

- (1) To return any official documents and/ or any equipments supplied by the Faculty (if any) to the Supervisor (s) or Head of Departments; and/or
- (2) To return any loan book(s) from the Faculty library (if any); and/or
- (3) To ensure the workspace provided by the Faculty/Department/Supervisor has been clear up.

Verification by Student

<input type="checkbox"/> Verification:	I hereby acknowledge that all information given is correct. I will be liable with any incorrect / false information		
Name:		Date:	Signature:

Verification by Supervisor(s)

<input type="checkbox"/> Verification:	I/We hereby acknowledge that all information given has been checked and is correct		
Name:		Date:	Signature:

Verification by Head of Department

<input type="checkbox"/> Verification:	I hereby acknowledge that all information given has been checked and is correct		
Name:		Date:	Signature:

<i>FOR OFFICE USE ONLY</i>	
<i>Complete</i>	
<i>Incomplete</i>	
<i>Verified by</i>	

Hidayah/2017