



Nomination of Thesis Examiner's Panel

Faculty/Institute :

(I) Student Details

Name :

ID of Candidate :

Date of Registration :

Programme :

Field of Study :

(II) Supervision of Thesis Details

Title of Thesis :

Expected Date of Submission :

Supervisor :

(III) Nomination of Thesis Examiner's Panel

Internal Examiner :

External Examiner(s)** :

**** Please provide CV/Resume, address, telephone and fax number and email of external examiners**

Approved By:

Dean / Director of Faculty /Institute

Official Stamp and Signature

Date