**APPOINTMENT OF INTERNAL / EXTERNAL EXAMINERS**

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| **Name / Matric No. / Programme** | **Thesis Title / Supervisor & Co-supervisor(s)** | **Proposed Examiner Committee Members** |
| Name:Matric No.:Programme: | Thesis Title: Supervisor: Co-Supervisor(s):

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 | **Internal Examiner:***E.g: Asst. Prof. Dr. Nour El Huda**Department of Basic Medical Sciences**Kulliyyah of Medicine**IIUM Kuantan Campus**25200 Kuantan Pahang***Internal Examiner (Alternate):****External Examiner:***E.g: Assoc. Prof. Dr. Wan Rohani Binti Wan Taib**School of Biomedicine, Faculty of Health Sciences, Universiti Sultan Zainal Abidin, 21300 Kuala Nerus, Terengganu* **External Examiner (Alternate):**  |
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| **Checked by Postgraduate Coordinator**Signature: Name and StampDate:  | **Recommendation of Head of Department**Signature:Name and StampDate:  | **KPGC Approval:****Deputy Dean (Postgraduate)**Signature:Name and StampDate:  |