



KULLIYAH OF NURSING
NOMINATION OF SUPERVISOR & SUPERVISORY COMMITTEE

INSTRUCTIONS:

A. Nomination of Supervisor & Supervisory Committee

- i. ONLY for new students who yet have an official supervisor & supervisory committee.
- ii. **Students** are to complete **section I** and submit it to the Proposed Supervisor / Supervisory Committee for their consent (*please attached the abstract OR proposal for references*).
- iii. **Proposed Supervisor & Supervisory Committee** to complete **section II** and submit the form to the Office of Deputy Dean Postgraduate Responsible & Research for further processing.

B. Propose Name for Supervisory Committee (New/Additional / Change)

- i. Main supervisor is to fill in the student details in the **section I** (*until Research Title ONLY*).
- ii. Main supervisor is to fill the **section III** and briefly justify proposing new / add / change the supervisory committee. Main supervisor is to submit the form to Office of Deputy Dean Postgraduate Responsible & Research for further processing.

A. NOMINATION OF SUPERVISOR & SUPERVISORY COMMITTEE

SECTION I: TO BE COMPLETED BY THE STUDENT

Name of Student:		Matric No.:	
Email:		Contact No:	
Program (Tick <input checked="" type="checkbox"/> appropriately):	<input type="checkbox"/> Master in Nursing Science (MINS) <input type="checkbox"/> Master of Health Science (M_KON)	<input type="checkbox"/> Doctor of Philosophy in Nursing (P_IN/P_NUR) <input type="checkbox"/> Doctor of Philosophy (P_KON)	
Research Title:			
Proposed Supervisor / Supervisory Committee:			
Main Supervisor:			
Co-Supervisor: (if any)			
Co-Supervisor: (if any)			
Chairman: (if any)			
<hr/> Signature of Student Date: <i>*By signing this form, I hereby agreed to be supervised by the supervisory committee subject to the approval of the KNPGRG.</i>			

SECTION II: TO BE COMPLETED BY THE PROPOSED SUPERVISOR / SUPERVISORY COMMITTEE

Main Supervisor:	Co-supervisor:	Co-supervisor:	Chairman:
..... Signature & Stamp Date: Signature & Stamp Date: Signature & Stamp Date: Signature & Stamp Date:

**By signing this form, I hereby agreed to supervise the above-named student and subject to the approval of the KNPGRG.*

B. PROPOSE NAME FOR SUPERVISORY COMMITTEE (NEW/ADDITIONAL / CHANGE)

SECTION III: TO BE COMPLETED BY THE MAIN SUPERVISOR

**Admin to check the present supervisor/supervisory committee in the system before approval in the KNPGRG.*

Propose Name for Supervisory Committee (<i>New/Additional</i>)	Kulliyah
Co-Supervisor:	
Co-Supervisor / Chairman:	
<u>Justification:</u>	
Propose Name for Supervisory Committee (<i>Change</i>)	Kulliyah
Main Supervisor:	
Co-Supervisor:	
Co-Supervisor / Chairman:	
<u>Justification:</u>	

Notes:

If the Main Supervisor/ Co-Supervisor/ Chairman is outside IIUM (different university) or from another kulliyah of IIUM, please provide a latest CV (using IIUM Format).

.....
Signature & Stamp
Date:

APPROVAL (to be complete by the secretary of KNPGRG)

The Kulliyah of Nursing Postgraduate & Research Committee Meeting No. _____ has agreed to approve the proposed name of supervisory committee for the above student.

Remarks :
Date of KNPGRG :