

EXAMINATION COMMITTEE REPORT FOR PRE-VIVA VOCE

Student's Particular and Examination's Details:

Student's Name	:	
Student ID	:	
Programme	:	
Faculty	:	
Date of Registration	:	
Status of Candidature	:	(Full Time/Part Time)
Research Title	:	
Main Supervisor	:	
Date of Examination	:	
Time	:	
Venue	:	
Chairman	:	

Verification by Examination Committee Members (Compulsory for Chairman and Examiners):

Members	Name and Signature	Date	
Chairman			
Examiner I			
Examiner II			

Comments for Student's Thesis

Date:

omments / Correct	tions to be done:			
ecessary, extra n	ages may be attached	l)		

IPS/Pre-viva/Rev02/07/12/20