

SUPERVISOR'S REPORT ON AMENDED GRADUATE (BY RESEARCH) THESIS

Part 1 – To be completed by Supervisor(s)

A. I/We confirm that the thesis has been amended to my/our satisfaction. If No, please comment below (attach separate sheet if necessary). () Yes () No

B. I/We have gone through the **detailed** summary of amendments done/response to the examiners' comments (for amendments not incorporated) and confirm that it is acceptable for transmission to the examiner(s). () Yes () No

(Note: Detailed summary is required for cases that require further examination.)

C. Other comments, if any (attach separate sheet if necessary).

Name of Supervisor(s)	Signature	Date
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Part 2 – To be completed by student & submitted to Student's Department/Faculty after thesis has been amended to satisfaction of supervisor(s)

Name of Student: _____ Student No.: _____
Department: _____ Tel No.: _____
Email: _____

I have amended my thesis to the satisfaction of my supervisor(s). The following are enclosed:

- () ___copies of my amended/revised thesis bound with **soft** cover for **further examination**.
- () Softcopy (pdf format) of the amended/revised thesis in CD-ROM / thumb drive for **further examination**.
- () **detailed** summary of amendments done/response to the examiners' comments (for amendments not incorporated).
- () The Electronic Thesis/Dissertation Submission form (RO.667/09) (re-examination is not required).
- () Feedback on Research Guidance form (obtainable from respective Department or Faculty/School).

Signature of Student

Date

Note:

Contact details provided in this form will not be automatically updated in our student record. Please login to the [Education Records System](#) to verify and update your contact details (where necessary). This is to prevent delayed or lost mail due to incorrect or obsolete student's addresses and contacts.

For Official Use (Acknowledgement of Receipt by Dept./Faculty Admin)*

Admin Name & Signature: _____ Date: _____

* Dept./Faculty to forward a scan copy of this form to the Registrar's Office.