

## 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**

Please state your comments in the space provided.

Comments / Corrections to be done:

(If necessary, extra pages may be attached)

Chairman's Signature:

Name:

Date: