UNIVERSITI TEKNIKAL MALAYSIA MELAKA	UTeM 29/1/6 (Ver.10/2012)
UNIVERSITI TEKNIKAL MALAYSIA MELAKA **CENTRE FOR GRADUATE STUDIES**	
PERTUKARAN MOD PENDAFTARAN	**CHANGE OF REGISTRATION MODE**

Arahan kepada pelajar:
1. **Permohonan hanya boleh dibuat pada semester pertama pengajian sahaja.**
2. **Sila isikan borang dengan lengkap. Hanya borang yang lengkap sahaja akan diproses.**

Instructions to student:
1. *Application can only be made in the first semester of studies.*
2. *Please fill up this form completely. Only completed form will be processed.*

Bahagian I (Diisi oleh pelajar) */Section I (To be completed by student)*

Nama *Name*	
No. KP / Pasport *IC / Passport No.*	
No. Matrik *Matric No.*	
Fakulti *Faculty*	
Program *Programme*	
Tahun dan Semester semasa *Current Year and Semester*	Tahun/*Year* _____ Semester/ *Semester* _____
Alamat Surat Menyurat *Correspondence Address*	
No. Tel. Bimbit *Mobile Phone No.*	

Bahagian II (Diisi oleh pelajar) */Section II (To be completed by Student)*

Saya memohon untuk menukar mod pendaftaran:
I wish to change mode of registration

☐ **Sepenuh Masa ke Sambilan**
Full Time to Part Time

☐ **Sambilan ke Sepenuh Masa**
Part Time to Full Time

Alasan/ _____
Reason _____
_____
_____

Sila kemukakan dokumen sokongan (jika berkaitan.) /Please attach supporting document (if applicable).

*Saya maklum bahawa pelajar berdaftar yang membuat permohonan pertukaran mod pendaftaran perlu membayar caj perkhidmatan sebanyak RM 100.00 kepada Pejabat Bendahari sepertimana yang dinyatakan dalam Peraturan Akademik Pengajian Siswazah tertakluk kelulusan pertukaran mod pendaftaran.

**I am aware that any registered student who apply for change of regisration mode will be charged RM 100.00 and shall pay to Bursary's Office as prescribe in the Postgraduate Academic Regulation subject to approval of the application.*

.....
Tandatangan Pelajar
Student's Signature

.....
Tarikh
Date

Bahagian III -Diisi oleh Penyelia/Dekan Fakulti
Section III - To be completed by Supervisor/Academic Advisor and Dean of Faculty

Ulasan Penyelia : *Comment by Supervisor/Academic Advisor* _____ _____ _____ **Sokong** ☐ **Tidak sokong** ☐ *Recommended* *Not Recommended* **Tandatangan Penyelia :** *Supervisor's Signature* **Cop Rasmi Penyelia:** *Supervisor's Stamp* **Tarikh :** *Date*	**Ulasan *Dekan Fakulti* :** *Comment by Dean of Faculty* _____ _____ _____ **Sokong** ☐ **Tidak sokong** ☐ *Recommended* *Not Recommended* **Tandatangan Dekan :** *Dean's Signature* **Cop Rasmi Dekan:** *Dean's Stamp* **Tarikh :** *Date*

Bahagian IV- Untuk kegunaan PPS / *Section IV- For PPS use*

Tindakan Dekan:
Dean of PPS

☐ **JKTSPS**

☐ **Lain-Lain**
Others …….

…… ……
Tandatangan dan Cop **Tarikh**
Signature and Stamp *Date*

_____

Keputusan / *Approval***:**

Lulus /Tidak Lulus
Approved / Not Approved

JKTSPS Bil:_____ Tarikh_____
JKTSPS No. *Date*

Dikemaskini di dalam SMPS pada (selepas pelajar membayar caj perkhidmatan)
Updated in SMPS on (after service fee is paid by student) _____

…… ……
Tandatangan staf yang mengemaskini status **Tarikh**
Signature of the staff updating the status *Date*

No. Staf:
Staff No.