THESIS SUBMISSION FORM

DEGREE : ☐ MASTER - 6 COPIES OF THESIS   ☐ PhD - 7 COPIES OF THESIS

SECTION A : STUDENT'S PROFILE

STUDENT NAME   :

PROGRAMME   :

FACULTY   :

MATRIC NO.   :

STUDY MODE   :   NO. OF SEMESTER   :

EMAIL ADDRESS   :   CONTACT NO.   :

CORRESPONDENCE ADDRESS   :

THESIS TITLE   :

Student's Signature :   Date :

SECTION B : CHECKLIST FOR DRAFT THESIS SUBMISSION (TO BE COMPLETED BY FACULTY)

	/	Remarks / Date

a) **RE-REGISTRATION** *(Student must complete re-registration for the current semster)*

b) **PUBLICATION** *(A copy of each paper with UMPIR registration number must be attached)*

Program	DSS	GRS	DRS / MRS	Regular Student
PhD	1 peer review 1 ISI journal 1 ISI Impact Factor	1 peer review 1 ISI journal 1 ISI Impact Factor	1 peer review 2 Scopus OR 1 peer review 1 Scopus 1 ISI	2 peer review AND 1 journal article
Master		1 peer review 1 ISI Impact Factor	1 peer review 1 Scopus	1 peer review
Remark (/)				

c) **GRADUATION REQUIREMENT**

  i. Pass the requirement of proposal defense

  ii. Present the faculty colloquium

  iii. Pass the prerequisite courses (if any) as determined by the faculty

  iv. Fulfill the minimum duration of candidature

  v. Has pass the Pre-viva set by the faculty *(A copy of UMP(IPS) PV-01) Form must be attached)*

d) **PLAGIARISM CHECKER REPORT** *(Use Class ID / Name by Faculty & Similarity Index **less than 25%** and is verified by Main Supervisor)*

e) **STATEMENT OF DECLARATION**

f) **PROPER FORMATTING (UMP THESIS GUIDELINE)**

g) **ENGLISH PROOF READ (LETTER)**

SECTION C : VERIFICATION BY MAIN SUPERVISOR

SUPERVISOR'S NAME : **ASSOC. PROF. DR. NORHAYATI BINTI ROSLI**

FACULTY : **CENTRE FOR MATHEMATICAL SCIENCES**

Item Assessed	Poor	Fair	Average	Good	Excellent
	(1 Mark)	(2 Marks)	(3 Marks)	(4 Marks)	(5 Marks)
Quality of publication (PO4-EM1)*	At least ONE article published in peer review article	At least ONE article published in ISI or Scopus Index	At least ONE article published in top rank Q3 journal	At least ONE article published in top rank Q2 journal	At least ONE article published in top rank Q1 journal
Quality of publication (PO4-EM1)*	ONE article published	TWO articles published	THREE articles published	FOUR articles published	MORE than FOUR articles published
Plagiarism checker report (PO4-EM1)*	Similarity index between 23-25%	Similarity index between 20-22%	Similarity index between 17-19%	Similarity index between 14-16%	Similarity index less than 14%
Thesis formatting (PO4-EM1)*	100% not comply with UMP Thesis Guideline	25% comply with UMP Thesis Guideline	50% comply with UMP Thesis Guideline	75% comply with UMP Thesis Guideline	100% comply with UMP Thesis Guideline
TOTAL MARKS					

*PO4 - Conduct research with minimal supervision and adhere to legal, ethical and professional code of practice; EM1 - Ethics

I hereby verify that the student has fulfilled the entire requirements as per checklist above and :-

☐ I have no objection for the student to submit his thesis for the examination

☐ I do not agree for the thesis to be submitted for examination

☐ Other comments : _____

_____

Signature and Stamp : Date :

SECTION D : VERIFICATION BY DEAN / DEPUTY DEAN OF RESEARCH

☐ Approved   ☐ Disapproved

☐ I have no objection for the student to submit his thesis for the examination

☐ I do not agree for the thesis to be submitted for the examination

☐ Other Comments : _____

_____

Signature and Stamp : Date :

SECTION E : VERIFICATION BY LIBRARY

NAME   : _____

DESIGNATION   : _____

☐   Student does not have any outstanding issue with the UMP Library

☐   Other comments : _____

Signature & Stamp :   Date :

SECTION F : VERIFICATION BY FINANCE OFFICE

NAME   : _____

DESIGNATION   : _____

I would like to verify that :

☐   The student does not have any outstanding payment to UMP.

☐   The student has an outstanding payment and is required to settle this outstanding payment amount, RM _____

☐   Other comments : _____

_____

Signature & Stamp :   Date :

SECTION G : VERIFICATION BY IPS

NAME   : _____

DESIGNATION   : _____

I would like to verify that I have received _____ copies of the student's draft thesis for the examination and all requirements have been fulfilled.

Signature and Stamp :   Date :

STUDENT COPY (TO BE COMPLETED BY IPS)

NAME   : _____

DESIGNATION   : _____

I would like to verify that **MUHAMMAD BILAL** Matric No. **PSE15004** has submitted copies of his draft thesis for examination and he has fulfilled all the requirement within rules and guidelines.

Signature & Stamp :   Date :