



Director of Center of Postgraduate Studies

Selangor Islamic University (SIU),
Bandar Seri Putra,
43000 Kajang,
Selangor.

Date : _____

Associate Prof. Dr.

ACKNOWLEDGEMENT OF ACCEPTANCE AS MAIN SUPERVISOR/ CO SUPERVISOR FOR THE SUPERVISION OF MASTER'S DEGREE (RESEARCH MODE & MIXED MODE)/ DOCTOR OF PHILOSOPHY (SELANGOR ISLAMIC UNIVERSITY (SIU))

With reference to the Appointment Letter dated on _____ reference no. _____, hereby agree/ do not agree to accept the appointment as Main Supervisor/ Co-Supervisor for the supervision Of Master's Degree (Research Mode & Mixed Mode)/ Doctor Of Philosophy Selangor Islamic University (SIU).

Student's Name	
Student's No.	
Academic Program	
Academic Session	
Intake	
Current Academic Session	
Current Semester	
Thesis/Dissertation Title	

Thank you,

Yours Sincerely,

Signature, Date & Official Stamp

** delete whichever is not applicable*