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| A logo with text on it  Description automatically generated | **SEKOLAH PENGAJIAN SISWAZAH**  *SCHOOL OF GRADUATE STUDIES* | SPS/37/2018/Pind.4/2025  Tarikh Kuat Kuasa: 7.10.2025 |
| **BORANG SENARAI PEMBETULAN**  *LIST OF CORRECTIONS FORM* |

|  |  |  |  |
| --- | --- | --- | --- |
| **Nama Calon**  *Candidate’s Name* | **:** | **TAJUK TESIS/ DISERTASI/** *TITLE OF THESIS/ DISSERTATION* | |
| **No. Matrik**  *Matric No.* | **:** | **Lama**  *Previous* | **:** |
| **Fakulti**  *Faculty* | **:** | **Baru**  *New* | **:** |
| **Penyelia Utama**  *Main Supervisor* | **:** |  |  |

Sila senaraikan SEMUA pembetulan yang diperlukan seperti yang disyorkan dalam **Laporan Pengerusi Peperiksaan Lisan.**

*Please list down ALL the required corrections as recommended in the* ***Chairman of the Oral Examination Report.***

| **Bil**  ***No.*** | **Komen**  ***Comment*** | **Pembetulan**  ***Correction*** | **M/S Lama *Old page(s)*** | **M/S Baru *New page(s)*** | **Pengesahan Pembetulan oleh Penyelia *(* √** / 𝑋𝑋 **dengan ulasan*)***  ***/ Correction Verification by Supervisor***  ***(* √** / **𝑋𝑋** ***with comments*)*)*** |
| --- | --- | --- | --- | --- | --- |
| **Komen Keseluruhan/*General Comments*** | | | | | |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| **Bab/*Chapter 1*** | | | | | |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
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| **Bab/*Chapter 2*** | | | | | |
| 1 |  |  |  |  |  |
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| **Bab/*Chapter 3*** | | | | | |
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| **Bil**  ***No.*** | **Komen**  ***Comment*** | | **Pembetulan**  ***Correction*** | | | **M/S Lama *Old page(s)*** | | **M/S Baru *New page(s)*** | **Pengesahan Pembetulan oleh Penyelia *(* √** / 𝑋𝑋 **dengan ulasan*)***  ***/ Correction Verification by Supervisor***  ***(* √** / **𝑋𝑋** ***with comments*)*)*** |
| **Bab/*Chapter 4*** | | | | | | | | | |
| 1 | |  | |  |  | |  | |  |
| 2 | |  | |  |  | |  | |  |
| 3 | |  | |  |  | |  | |  |
| **Bab/*Chapter 5*** | | | | | | | | | |
| 1 | |  | |  |  | |  | |  |
| 2 | |  | |  |  | |  | |  |
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| **Bab/*Chapter 6*** | | | | | | | | | |
| 1 | |  | |  |  | |  | |  |
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Nota: Jadual ini boleh dipinda mengikut kesesuaian walau bagaimanapun butiran sedia ada tidak boleh dibuang. Lajur tambahan untuk semakan penilai dibenarkan

*Notes: This table may be modified however, its details must not be deleted. Additional columns for examiners’ review are allowed.*

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| **Pembetulan Disediakan oleh** /  *Corrections Prepared by :* | **Nama Pelajar** / *Student’s name*: | | | |
| **Tandatangan** / *Signature :* | | **Tarikh** / *Date :* | |
| **Pengesahan oleh /** *Verified by* | | | | |
| **Penyelia Utama** */ Main Supervisor:*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  Tandatangan dan Cop Rasmi  *Signature & Official Stamp*  Tarikh / *Date :* | | **Pemeriksa Dalam**(jika perlu) /*Internal Examiner (if needed) :*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  Tandatangan dan Cop Rasmi  *Signature & Official Stamp*  Tarikh / *Date :* | | **Pemeriksa Luar**(jika perlu) /*External Examiner (if needed) :*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  Tandatangan dan Cop Rasmi  *Signature & Official Stamp*  Tarikh / *Date :* |
| Nota/*Note*:  Pengesahan ini dibuat berdasarkan pembetulan yang disenaraikan dalam Laporan Pengerusi Peperiksaan Lisan.  *This verification is made based on the corrections listed in the Chairman’s Report for the Oral Examination.* | | | | |