



ALBUKHARY INTERNATIONAL UNIVERSITY

Centre for Graduate Studies (CGS)
Albukhary International
University

CHANGE OF SUPERVISOR

AIU-301-HB-01/FM04

INSTRUCTIONS TO STUDENT

1. **Complete Section I and Section II** and submit the form to the CGS.
2. Applications for a change of supervisor must be submitted to CGS no later than the second semester for Master's degree programmes or the fourth semester for Doctoral degree programmes.
3. The application must include a written justification and any relevant supporting documents.

SECTION I: CHANGE OF SUPERVISOR [TO BE COMPLETED BY THE STUDENT]

Name:	
Student No.:	Type of Programme: Masters / PhD
Name of Programme:	
Telephone No.:	Email:
Thesis Title:	
Name of Current Supervisor/Supervisory Committee:	
Main Supervisor:	
Co-Supervisor:	
Proposed Name(s) of New Supervisor/Supervisory Committee:	
Main Supervisor:	
Co-Supervisor:	

Justification for Change of Supervisor (to be filled by student) (30 words):

Signature of Student
Date:

SECTION II: DECLARATION BY CURRENT SUPERVISOR

To be completed by the Main or Co-Supervisor who is releasing the student.
(Please cancel as appropriate)

I am/ am not willing to release my role as the Main supervisor/Co-supervisor	
Signature and Official Stamp of the Supervisor:	Date:

SECTION III: DECLARATION BY THE NEW SUPERVISOR

(Please cancel as appropriate)

<p>I am willing to be the Main Supervisor/Co-supervisor for the student. I confirm that I possess the necessary competence to guide the student throughout the remainder of the research programme and accept the supervisory responsibilities as outlined in the Postgraduate Academic Regulations.</p> <p>I also confirm that I am not currently overloaded with other supervision duties assigned to me.</p> <p>Other Comments:</p>	
Signature and Official Stamp of the Supervisor:	Date:

SECTION IV: ACKNOWLEDGEMENT BY MAIN SUPERVISOR

To be completed only if the Co-Supervisor is being changed. The Main Supervisor must acknowledge and approve this change.

<p>I, the undersigned, acknowledge that the student has requested a change of Co-Supervisor. I have reviewed the request and hereby confirm my agreement to the proposed change.</p> <p>[<input type="checkbox"/>] Approved [<input type="checkbox"/>] Not Approved</p> <p>Comments (if any):</p>	
Signature and Official Stamp of the Supervisor:	Date:

