CONVERSION OF STATUS

(Full time to Part time or Vice Versa)

The conversion of status is permitted twice only during the entire period of candidature. Students must read and understand the rules and regulations as stated in student handbook. Please complete all sections before submitting the form to IPS. The application must be done within the first two weeks of the semester.

SECTION 1 (To be completed by Student)

1. Student's Profile

Student Name	:			
IC/Passport No.	:		Student ID :	
Programme	:		Faculty :	
Current Result	:			(CPA & GPA / Progress Result)
Candidature	:	Registration Date as UMP Student		Current Semester/Academic Session
2. Justifications for	Con	version		
Conversion	:	Full time (FT) to Part Time (PT)	Part tin	ne (PT) to Full time (FT)
I, as per information	on abo	ove, would like to request for the conversion becau	ise:	
3. Have you ever a If yes, please answe		ed for the conversion of status before? following:	Yes	No
Conversion	:	Semester/Academic Session	FT to P	T PT to FT
Student's Signatur	e :		Date:	
SECTION II (To b	e cor	npleted by Supervisor for research mode stude	nt)	

	Approved		Disapproved
Comment from Supervisor:			
Date:			
Supervisor's Signature and Stamp:			

SECTION III (To be completed by Head of Programme/Deputy Dean of Research)

	Approved		Disapproved	
Comm	Comment from Head of Programme / Deputy Dean of Research:			
Date:				
Signature and Stamp:				

SECTION IV (To be completed by Dean of Faculty)

	Approved		Disapproved
Comment from Dean:			
Date:			
Dean's Signature and Stamp:			

SECTION V (To be completed by IPS)

Within rules	Further actions to be taken:			
& procedures	MPSU & Senate Matters	Administration Matters		
Yes	MPSU to be informed Completed Date: MPSU approval Yes No Date: Senate to be informed Completed Date:	 Verification by Dean of IPS Date: Change status in the system Date: Letter to Faculty Date: IPS Staff[*]s Name: 		
No No Reasons:	MPSU to be informed Completed Date: MPSU approval Yes No Date: Senate to be informed Completed Date:	 Verification by Dean of IPS Date: Change status in the system Date: Letter to Faculty Date: IPS Staff^xs Name: 		
Verification by Dean of IPS	Bring to MPSU for information Bring to MPSU for approval (Signature & Stamp)			
Date:	fy that this student matter has been solved. gnature and Stamp:			