

CHANGE REQUEST APPLICATION FORM
 UNIVERSITY OF MALAYA BRIGHT SPARKS SCHEME (SBSUM)

PART A : CANDIDATE'S INFORMATION	
NAME :	MATRIC NO :
DEPARTMENT :	FACULTY/ACADEMY/INSTITUTE/CENTRE :
SEMESTER / YEAR :	CANDIDATURE PERIOD OF SBSUM:
INITIAL ACTIVATION SBSUM DATE :	CURRENT CYCLE :

I HEREBY REQUEST TO CHANGE THE FOLLOWING : *(Please tick whichever applicable)*

FIELD OF RESEARCH
 SUPERVISOR
 DEPARTMENT
 FACULTY

CURRENT : *FIELD OF RESEARCH / SUPERVISOR / DEPARTMENT / FACULTY :

NEW : *FIELD OF RESEARCH / SUPERVISOR / DEPARTMENT / FACULTY :

**Cancel which not applicable*

PART B : JUSTIFICATION (to complete by candidate)

PART C : APPROVAL BY SUPERVISOR	PART D : APPROVAL BY DEAN / DIRECTOR ACADEMY/ FACULTY/ INSTITUTE / CENTRE
<input type="checkbox"/> RECOMMENDED <input type="checkbox"/> NOT RECOMMENDED COMMENT : _____ _____ SIGNATURE : _____ DATE : _____ OFFICIAL STAMP : _____	<input type="checkbox"/> RECOMMENDED <input type="checkbox"/> NOT RECOMMENDED COMMENT : _____ _____ SIGNATURE : _____ DATE : _____ OFFICIAL STAMP : _____

PART E : APPROVAL BY BRIGHT SPARKS UNIT
<input type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED OFFICIAL STAMP & SIGNATURE : _____ DATE : _____