

DEPARTMENT OF COMPUTER SCIENCE KULLIYYAH OF INFORMATION & COMMUNICATION TECHNOLOGY

Final Year Project 2 Semester 2, Year 2018/2019

SUPERVISOR ASSENT FORM

** One form to be filled by one student

SECTION A: APPLICANT INFORMATION (for Student)			
SECTION A. AFFEICANT INFORMATION (IOI Student)			
Name:		Matric No.	
Email:		Mobile No.	
I agree my Final Year Project 2 to be supervised by the Supervisor, whose particulars are shown in SECTION C below.			
	Signature		Date
SECTION B: PROJECT INFORMATION (for Student)			
Project ID			
Title			
Category			
SECTION C: SUPERVISOR CONSENT (for Supervisor)			
I agree to supervise Final Year Project 2 of the applicant, whose particulars are shown in Section A above.			
Name & Stamp Signa		ture	Date