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|  UTM <small>UNIVERSITI TEKNOLOGI MALAYSIA</small> <small>RESEARCH UNIVERSITY</small> | SCHOOL OF COMPUTING FACULTY OF ENGINEERING UNIVERSITI TEKNOLOGI MALAYSIA |
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PSM 1 (SECJ 3032) REPORT REVIEW AND APPROVAL FORM

Session/Semester: 2/2022/2023

Instruction: [Student] Please complete Section A. [Supervisor] Please complete Section B and C. Then, student submits the completed form with the corrected Final Report for PSM 1 evaluation to the PSM 1 Department Coordinator. This form must be filled in ONE (1) copy.

SECTION A: STUDENT INFORMATION

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|------------------------|---|
| Student Name | Iman Aidi Elham bin Hairul Nizam |
| Project Title | Preserving Cultural Heritage Sites Through Random Forest and XGBoost Algorithm for Microclimate Monitoring and Prediction |
| Supervisor Name | Prof. Madya. Ts. Dr. Mohd Shahizan bin Othman |

SECTION B: MEETING FREQUENCY

Guideline: Please fill in this section according to the meeting frequency of the student and the supervisor. Mark ✓ in the appropriate box.

1. Meeting Frequency:

- [] Sufficient (*at least once every TWO (2) weeks*)
 [] Not Sufficient

2. If Not Sufficient:

- [] Warning Letter I has been issued to student
 [] Warning Letter II has been issued to student

SECTION C: SUPERVISOR DECLARATION AND REPORT

Guideline: Please state status of the student's project proposal (mark ✓ in the appropriate box). You may provide written report if necessary.

1. I hereby declare that:

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| The student final report meets the PSM 1 scope. Student can do his/her PSM 1 presentation. | Pass | |
| The student final report needs modification to meet the PSM 1 scope. Student is allowed to present only if the condition are satisfied. | Conditional Pass | |
| The student final report did not meet PSM 1 scope. Student cannot do his/her presentation. | Fail | |

2. Supervisor Report*(Please provide attachment if any)*

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3. Supervisor* Certification

I hereby certify
 that ***I have received and read*** the above mentioned student's Final Report and allow/not allow
 him/her to present.

Date :

Signature :

Official Stamp

SECTION C: PSM 1 DEPARTMENT COORDINATOR

I hereby certify
 that I have received an approval confirmation from this supervisor for his/her student final year
 project presentation.

Date :

Signature :

Official Stamp

Notes: *Supervisor - please return this form to the your Department's PSM1 Coordinator