

 <b>UTM</b> <small>UNIVERSITI TEKNOLOGI MALAYSIA</small> <small>RESEARCH UNIVERSITY</small>	School of Computing Faculty of Engineering Universiti Teknologi Malaysia
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## PSM 2 (SECJ 4134) REPORT REVIEW AND APPROVAL FORM

Session/Semester: 2022/2023/2

**Instruction:** [Student] Please complete Section A of this form. [Supervisor] Please complete Section B and C. Then, student submits the completed form with the corrected Final Report for PSM 2 evaluation to the PSM 2 Department Coordinator. This form must be filled in ONE (1) copy.

### SECTION A: STUDENT INFORMATION

Student Name : THORIQULHAQ JIBRIL AL QUDSY  
 Project Title : POWER PLANTS PERFORMANCE MONITORING SYSTEM IN  
 PT PLN (PERSERO) UP3 PAMEKASAN  
 Supervisor Name : 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 final report (mark ☒ in the appropriate box). You may provide written report if necessary.

#### 1. I hereby declare that:

The student final report meets the PSM 2 scope.  
 Student can do his/her PSM 2 presentation.

<b>Pass</b>	
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The student final report need to be modified  
 to meet the PSM 2 scope. Student is allowed  
 to present only if the condition are satisfied

<b>Conditional Pass</b>	
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The student final report did not meet PSM 2 scope.  
 Student cannot do his/her presentation.

<b>Fail</b>	
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**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

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**SECTION C: PSM 2 DEPARTMENT COORDINATOR**


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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 PSM2 Coordinator**