

THESIS/DISSERTATION ROUTE SLIP

Date: January 10, 2026

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Last Name First Name

M.I.

Course: MASTER IN INFORMATION TECHNOLOGY (MIT) Major (if applicable): _____

Thesis/Dissertation Title:

Adviser: Adviser Name of Panel Member: _____

Action Taken:

Based on my thorough review of the manuscript, I hereby recommend it as follows: (Please check only one)

- Approval for the conduct of the study.
- Approval for the conduct of the study but still subjected to minor revisions and improvement.
- Disapproval. The paper needs further major revisions and improvement.



Signature