



**REQUEST FOR APPOINTING COMMITTEES OF  
THESIS PROPOSAL EXAMINATION**

**Academic Support Division**

Date Receipt.....

Time.....

Receiver.....

**Semester.....Academic Year.....**

To Program Director of ☐ ABS ☐ CS ☐ ET

I am ....., Thesis Advisor  
of..... (student name), student ID .....  
who is studying for a ☐ Master ☐ Doctoral Program ☐ ABS ☐ CS ☐ ET  
would like to request for appointing Committees for Thesis Proposal Examination as follows;

1. \_\_\_\_\_ Chairperson (Advisor)
2. \_\_\_\_\_ Committee (Co-Advisor) (if any)
3. \_\_\_\_\_ Committee (External)
4. \_\_\_\_\_ Committee
5. \_\_\_\_\_ Committee

Remark: At least 3 persons

Thesis Proposal Examination Date (D/M/Y) ..... Time .....

Venue .....

I hereby verify that all appointed committee members meet the required qualifications.

Please be informed for consideration.

Qualification of a Thesis Committee	
Internal Committee	External Committee
• Being faculty member of program	• Holding Ph.D.
• Holding Ph.D.	• Having 5 publications (for Master that are related the student's thesis topic)
• Having at least 3 publications (within 5 years backward), and at least 1 being a research article	• Having 10 publications (for Doctoral that are related the student's thesis topic)

Signature.....

(.....)

Thesis Advisor

Date...../...../.....

Program Director's Approval for examination

☐ Approved ☐ Not Approved

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Signature .....

(.....)

Date..... /..... / .....