



Jabatan Pengurusan Sumber Manusia

**PLAN OF STUDIES
(FOR DIPLOMA/BACHELOR/MASTER SCHOLARSHIP HOLDER)**

TPM	<input type="checkbox"/>	Basiswa Staf Akademik	<input type="checkbox"/>
PSPM	<input type="checkbox"/>	Basiswa Staf P & P	<input type="checkbox"/>
CBTG	<input type="checkbox"/>	CBBPTB/CBBPTAL	<input type="checkbox"/>

Please (✓) relevant column

NAME OF STUDENT :

PLACE OF STUDY :

PERIOD OF STUDY APPROVED :

PROGRAMME OF STUDY :

AREA OF SPECIALIZATION :

Term/Semester Quarter System	Discipline Prefix/Subject	Subject/ Course Title	Credit Hours Attempted	Remarks: Major Minor Gen./Elect. Requirement

Credit Hours required : _____ Credit Hours Exempted : _____

Total Hour : _____

Authorised by:

Name of Supervisor

Signature of Supervisor/Dean & Official Stamp

Date: _____