



ACADEMIC RESEARCH PAPER REGISTRATION FORM

Name: _____

Matric No: _____ Tel No. _____

Programme: _____

Semester : _____

Final Semester/Session: () 20 ___/___

Suggested Topic of Research: _____

Synopsis of Research: _____

Student's signature:

RECOMMENDED SUPERVISOR (RECOMMENDATION FROM STUDENT)

Supervisor name: _____ Signature: _____

Approved/Not Approved

Date: _____

Signature: _____

(HEAD OF DEPARTMENT)

NOTE:

- You need to ensure the Supervisor's expertise matches with your proposal research topic.
- You need to report to your supervisor once the official list of supervisor-student is announced.
- You need to fix a meeting schedule with your supervisor and plan your research duration.