



SUKKUR IBA UNIVERSITY

Merit-Quality-Excellence

APPLICATION FOR CHANGE OF THESIS TOPIC

SEMESTER: _____ SESSION: _____

INSTRUCTIONS

To Applicant

Please complete section A and follow the instructions:

(i) To Be Complete By the Current Supervisor/Mentor

Submit this form to current supervisor/mentor for completed purpose

(ii) To HoD of Business Administration for Approval

Submit this form to HoD for approval

(iii) Return this form to Coordinator MS/PhD Programme Sukkur IBA University

SECTION A

(To be completed by applicant)

1. Name:	2. Registration No:
3. Mailing Address:	4. Telephone: Home: Office: Mobile:
5. Department:	6. Email:
7. Programme:	8. Mode of Study: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
9. Current Structure of Study: <input type="checkbox"/> Course work <input type="checkbox"/> Course work and Thesis/Dissertation <input type="checkbox"/> Research	
10. Current Title of Thesis/Dissertation:	
11. Proposed Title of Thesis/Dissertation:	

12. Applicant's Signature:	Date:
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SECTION B

(To be completed by the current supervisor/Mentor)

Comments:

- Agree
- Not Agree

Signature and Stamp: _____ Date: _____

Name: _____

SECTION C

(To be completed by the Coordinator MS/PhD for approval)

Comments:

- Approved
- Not Approved

Signature and Stamp: _____ Date: _____

Name: _____

SECTION D

(To be completed by the Dean/Vice-Chancellor for approval)

Comments:

- Approved
- Not Approved

Signature and Stamp: _____ Date: _____

Name: _____

FOR OFFICIAL USE

Signature and Stamp: _____ Date: _____