unisel
UNIVERSITI SELANGOR

APPEAL TO CONTINUE STUDY

APPLICANT PARTICULARS

Name

Student ID

Telephone No.

Programme : _____

Intake Session : _____   Appeal Session : _____

Grade Point Average (GPA) : _____   Cumulative Grade Point Average (CGPA) : _____

Reason for Appeal : _____

Signature : _____   Date:

APPROVAL TO CONTINUE STUDY
(OFFICE USE)
ASSISTANT REGISTRAR

Approval:

Date: Signature & Official Stamp:

Academic Appeal Committee Meeting	☐	No. ……./………. _____
Academic Committee Meeting	☐	No. ……./………. _____
Post Graduate Committee Meeting	☐	No. ……./………. _____ Name:
Senate Meeting	☐	No. ……./………. _____ Date:

CONFIRMATION OF COURSE REGISTRATION

Add Courses(s):

NO.	COURSE CODE	COURSE NAME	GROUP
1			
2			
3			
4			
5			
6			
7			
TOTAL CREDIT HOURS			

(*For Failed Status*: The maximum amount of credit allowed is 12 credit hours for the long semester and 6 credit hours for the short semester)

Faculty (Programme Co-Ordinator)
Signature & Official Stamp:

Name:
Date:

Faculty (Dean)
Signature & Official Stamp:

Name:
Date:

STUDENT FINANCE & CREDIT CONTROL UNIT	RECORDS & CONVOCATION UNIT	EXAMINATION & COURSE EVALUATION UNIT
Signature & Official Stamp:	Signature & Official Stamp:	Signature & Official Stamp:
Name:	Name:	Name:
Date:	Date:	Date: