

SPH5005 PRACTICUM FINAL REPORT: SUPERVISOR'S ENDORSEMENT FORM

PARTICULARS OF STUDENT

FULL NAME:		STUDENT NO.:	
EMAIL:		CONTACT NO.:	
SEMESTER: 1 2	ACADEMIC YEAR: 20____ / 20____	STATUS:	Full-Time Part-Time
PRACTICUM TOPIC:			
PERIOD OF PROJECT:	____/____ (MM/YYYY) TO ____/____ (MM/YYYY)		
PRACTICUM SUPERVISOR:			
Please specify where the research data is stored:			
<p><u>Access to practicum deliverables for future learning</u></p> <p>I understand that my presentation slides and final report may be used as reference.</p> <p>I would like to opt out with the following reasons:</p>			
			SIGNATURE OF STUDENT/ DATE

TO BE COMPLETED BY PRACTICUM SUPERVISOR:

COMMENTS (IF ANY):	
	SIGNATURE OF SUPERVISOR/ DATE

TO BE COMPLETED BY EDUCATION OFFICE

DATE RECEIVED:	
CONTENTS CHECKED: YES NO	
	NAME/ SIGNATURE / DATE

TO BE COMPLETED BY MODULE COORDINATOR (if necessary):

COMMENTS (IF ANY):	
	SIGNATURE OF MODULE COORDINATOR / DATE