

Name: _____

Address: _____

Tel No:

Date:

Dean

Student Development & Alumni

College of Business

Universiti Utara Malaysia

06010, Sintok

Kedah Darul Aman

Through

Practicum Supervisor Report

School of _____

Universiti Utara Malaysia

Sir

APPLICATION FOR INCOMPLETE REPORT STATUS (TL) FOR FINAL PRACTICUM REPORT SESSION _____.

The above matter refer.

I _____ Matric No _____ Program course

_____ School of _____

Will like to apply for the incomplete report status (TL) for final practicum report session _____.

Reasons for the application of TL:

Therefore, I really hope my application can be approved by your office. Your consideration and approval is highly appreciated.

Thank you.

Yours sincerely

(_____)