

Request Form for Under Graduate Expedited Review

Please print in A4 size paper

SECTION I: Program Information			
1. Program name	<i>Food Technology</i>		
2. Name of School/Centre	<i>School of Industrial Technology</i>		
3. Name of the Program coordinator	<i>Associate Professor Dr. Fazilah Ariffin</i>		
Office no.	<i>+604 6536216</i>		
Mobile no.	<i>019....</i>		
e-mail add:	<i>fazilah@usm.my</i>		
SECTION II: Students Information			
1. No. of students project to be reviewed	<i>E.g 20</i>		
2. Year / semester of study	<i>2016/2017</i>		
3. Academic requirement of study	<input type="checkbox"/> Program Project <input type="checkbox"/> Elective <input type="checkbox"/> Industrial training <input type="checkbox"/> Others (please indicate):		
4. Project timeline <i>The timeline of the project to be initiated and completed based on the program schedule</i>	<i>Date of initiation</i> <i>1 February 2017</i> <i>Date of completion</i> <i>1 June 2017</i>		
5. Requested by:	<i>Dr Maizura Murad</i>		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">Designation</td> <td style="padding: 5px;"><i>Final Year Project Coordinator 2016/2017</i></td> </tr> </table>	Designation	<i>Final Year Project Coordinator 2016/2017</i>
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6. Signature & Official stamp			

**** A COPY [1] of the research proposal, subject information sheet and informed consent [if applicable] and all relevant forms and questionnaire MUST be submitted to the JEPeM secretariat at least 7 days before the schedule of the review.**

Please fill in SECTION II A for each student's project

SECTION IIA: SUPERVISOR APPROVAL <i>This section should be signed by the appointed Supervisor of the Principal Investigator (Undergraduate Student) that approved the study</i>	
STUDY PROTOCOL TITLE:	<i>Effect of pasteurisation on physicochemical properties, antioxidant capacity and consumer acceptability of sugarcane juice.</i>
Principal Investigator:	<i>Chong Yin Hung</i>
I confirm that I have read this Application and that the research will be implemented under my supervision in accordance with the conditions of approval by the JEPeM-USM. I also confirm that the Principal Investigator is a student under my supervision.	
Supervisor Name	<i>Dr Maizura Murad</i>
Signature:	Date of Signature:

For JEPeM-USM Secretariat Purposes Only	
Request received date:	
Reviewer:	
Expedited review schedule:	
Date:	
Time:	
Place:	

Verified by:

Secretary
Jawatankuasa Etika Penyelidikan (Manusia), JEPeM
Universiti Sains Malaysia