

FACULTY OF COMPUTING & INFORMATICS UNIVERSITI MALAYSIA SABAH LABUAN INTERNATIONAL CAMPUS

ASSIGNMENT SUBMISSION FORM								
COURSE CODE :		COU	RSE NAME :					
LECTURER :								
TOPIC/TITLE :								
I hereby declare that the which acknowledge. I un for this course.	_	•	•	mmaries and references and and will cause FAIL				
(Student's Signature)			(Receiver's Stam	p & Signature)				
Name:			Name:					
Student ID:			Date:					
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