

UNIVERSITY OF DAR ES SALAAM
DIRECTORATE OF POSTGRADUATE STUDIES

**NOTICE OF INTENTION TO SUBMIT A THESIS/DISSERTATION AND
EXAMINATION ARRANGEMENTS***

SECTION A: TO BE COMPLETED BY THE CANDIDATE

- (1) Name in full:
- (2) Registration number:
- (3) Department:
- (4) College/School/Institute:
- (5) Degree registered for:
- (6) Title of thesis/dissertation:
.....
.....
.....
- (7) Name(s) of Supervisor(s)
.....
.....
- (8) I hereby declare that I have completed my thesis/dissertation research, and intend to submit my thesis/dissertation within the coming three months.
Date: Signature of Candidate

SECTION B: TO BE COMPLETED BY SUPERVISOR(S)

- (9) I/We hereby confirm that the candidate is in the process of drafting his/her thesis/dissertation and I am/we are of the opinion that he should be in a position to submit the thesis/dissertation within three months from now.

Date: Signature of Supervisor

Date: Signature of Supervisor

Date: Signature of Supervisor

SECTION C: TO BE COMPLETED BY THE HEAD OF DEPARTMENT

After consultation with the supervisor(s) of the candidate, I propose that the following be considered for appointment as examiners for the candidate's thesis/dissertation:

(a) Potential External Examiners

(10) Name:.....
Affiliation:
Postal Address:
Telephone:..... Fax:
Email:.....
Curriculum Vitae: Attached Not attached

(11) Name:.....
Affiliation:
Postal Address:
Telephone:..... Fax:
Email:.....
Curriculum Vitae: Attached Not attached

(b) Proposed Internal Examiners

(12) Name:.....
Affiliation:
Postal Address:
Telephone:..... Fax:
Email:.....
Curriculum Vitae: Attached Not attached

(13) Name:.....
Affiliation:
Postal Address:
Telephone:..... Fax:
Email:.....
Curriculum Vitae: Attached Not attached

SECTION D: TO BE COMPLETED BY PRINCIPAL OF COLLEGE/DEAN OF SCHOOL/DIRECTOR OF INSTITUTE

(a) The proposed examiners above have been approved by the Board/Committee of the College/School/Institute.

- (b) After consultation with the Head of Department and our College/School/Institute's Postgraduate Studies Committee Chairperson, I recommend that the following be appointed to serve as *VIVA VOCE* panellists (for thesis examination only):

PANEL MEMBERS	DESIGNATION
1.	Chairperson
2.	External Examiner or Representative
3.	Internal Examiner (who did not guide the research)
4.	Candidate's supervisor
5.	Head of the relevant Department (or his/her appointee)
6.	Co-opted Member (appointed by College/School/Institute)
7.	Co-opted Member (appointed by College/School/Institute)
8.	Co-opted Member (for PhD only)
9.	Appointee of the Principal (for PhD only)

- (c) In anticipation of the fact that the candidate will submit his/her thesis within three months from now, it is recommended that the *viva voce* be held in the month ofof the year The exact date will be communicated later.

Date: Signature of Principal/Dean/Director:

SECTION E: TO BE FILLED BY THE CHAIRPERSON, SPSC (on behalf of SPSC)

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<input type="checkbox"/>	The examination arrangements herewith are complete and are approved.
<input type="checkbox"/>	The examination arrangements are not complete for the reasons stated below, and are hereby referred back to the College/School/Institute

The following items are missing or incomplete:

.....

DateSignature of the Chairperson, SPSC

* To be filled in triplicate. Two copies of this form MUST be returned to the Department and College/School/Institute.