THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY
THE UNIVERSITY OF DODOMA

NOTICE OF INTENTION TO SUBMIT PROPOSAL PRESENTATION ARRANGEMENTS

SECTION A: TO BE COMPLETED BY THE CANDIDATE

Name in full: …… Registration No:……

Department: …… College/School/Institute:……

Programme Registered For: ……

Title of Thesis/Dissertation: ……

I, …… hereby declare that I have completed my research proposal and intend to submit it within the coming one (1) month.

Signature of Candidate: …… **Date** ……

SECTION B: TO BE COMPLETED BY SUPERVISOR(S)

I hereby confirm that the candidate is in the process of drafting his/her proposal and I am of the opinion that he/she should be in a position to submit it within the coming one (1) month from now.

Name of Supervisor 1……**Signature** ……**Date**……

I hereby confirm that the candidate is in the process of drafting his/her proposal and I am of the opinion that he/she should be in a position to submit it within the coming one (1) month from now.

Name of Supervisor 2……**Signature** ……**Date**……

SECTION C: TO BE COMPLETED BY THE HEAD OF DEPARTMENT

I recommend the following be appointed to serve as research proposal presentation panel:

Panel Member	**Designation**
1.	Chairperson (Senior Lecturer and/or above)
2.	Coordinator of Postgraduate Studies (Secretary)/Representative
3.	Reviewer 1/ Representative
4.	Reviewer 2/ Representative
5.	A candidate's supervisor/ Representative

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

Please Tick (√) where appropriate

	The examination arrangements are herewith complete and are approved.
	The examination arrangements are not complete for the reasons stated below and are hereby referred back to the Directorate of Postgraduate Studies

The following items are missing or are incomplete:

……

……

……

Name: ……**Signature**: …… **Date**: ……