



**MACHAKOS UNIVERSITY
GRADUATE SCHOOL**

NOTICE OF SUBMISSION OF THESIS /PROJECT FOR EXAMINATION

NB: This form should be filled in duplicate and submitted to the Dean Graduate School at least three (3) months before the Thesis or Project is submitted for Examination

Student's Name: _____

Registration Number: _____

School: _____

Department: _____

Thesis/Project Title: _____

Student's Signature: _____ Date of Submission _____

I certify as Supervisor that the Thesis/Project is adequate in form and content for Examination

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| Name of Supervisor 1 | Signature | Date |
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| Name of Supervisor 2 | Signature | Date |
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| The School Post Graduate Coordinator | Signature | Date |
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| Chairman of Department | Signature | Date |
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| Dean of Relevant School | Signature | Date |
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| Dean Graduate School | Signature | Date |
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