

KENYATTA UNIVERSITY
GRADUATE SCHOOL

Proposal Tracking Instrument

SECTION A: DEPARTMENTAL LEVEL (Fill in triplicate)

SCHOOL.....DEPARTMENT.....
Name of Departmental Chair
Date Proposal received at the Department.....
Type of Programme (Masters Project/Thesis, PhD).....
Registration number.....Name of candidate.....
Title of Proposal.....
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.....
First Supervisor..... Qualification..... Designation.....
Second Supervisor..... Qualification..... Designation.....
Third Supervisor..... Qualification..... Designation.....
Date of First presentation
First Reader..... Qualification Designation.....
Second Reader..... Qualification Designation.....
Third Reader..... Qualification Designation.....

Date of receipt of Departmental minutes by Candidate:.....
Signature..... Date.....

Submission of Overseer's Reports

First Overseer.....Qualification.....Designation..... Date.....
Second Overseer..... Qualification..... Designation..... Date.....
Third Overseer..... Qualification..... Designation..... Date.....
Comments by Departmental BPS Chairman
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Date of second Departmental presentation (*Where applicable*)

Submission of Overseer's Reports

First overseer..... Qualification.....Designation..... Date.....
Second overseer..... Qualification.....Designation..... Date.....
Third overseer..... Qualification.....Designation..... Date.....
Comments from Departmental BPS Chairman
.....
Departmental Chairman's comments
.....
Signature Date.....
Date Proposal forwarded to School BPS.....
Chairman's Signature.....

Note: Please retain a copy of this Instrument as you forward the proposal to the school.

SECTION B: SCHOOL LEVEL

Name of Dean..... Date.....

Date Proposal received.....

Title of the Proposal.....

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First Supervisor..... Qualification..... Designation..... Date.....

Second Supervisor..... Qualification..... Designation..... Date.....

Third Supervisor..... Qualification..... Designation..... Date.....

Date Proposal processed.....

Name of School BPS Chairman Date..... Signature... ..

Date proposal forwarded to Graduate School.....

Comments by the Dean

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Dean's Signature..... Date.....

Note: Please retain a copy of this Instrument as you forward the proposal to Graduate School.

SECTION C: GRADUATE SCHOOL LEVEL

Name of Dean..... Signature..... Date.....

Date Proposal received

Title of the proposal.....

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First Supervisor..... Qualification..... Designation..... Date.....

Second Supervisor..... Qualification..... Designation..... Date.....

Third Supervisor..... Qualification..... Designation..... Date.....

Date Proposal processed.....

Comments by the Dean

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Signature:..... Date.....

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Date of registration

Name of registering officer.....Signature.....Date.....

Date of issuance of registration letter.....

Name of issuing officer.....Signature..... Date.....