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	Document: F	orm	Ref No.: TUM/Form/SGS/009	
	Title: CERTIFICATE OF CORRECTION			
	Department: SCHOOL OF GRADUATE STUDIES			
	Issue No. 1	Revision No. 0	Date: 4th August 2016	

(NB: This certificate of correction/ revision should be submitted to the Director School of Graduate Studies for clearance before the Thesis/Project Report is bound as a hard copy)

PART I: CANDIDATE PARTICULARS

Name of candidate	Registration No:
Department of study:	School/Faculty:
Name of Degree (e.g. MBA, MPH, PhD Chemistry)	-
Area of specialization:	
Title of Thesis/Project:	
~	
Signature of candidate: Date:	Cell phone No:

PART II: DECLARATION BY BOARD OF EXAMINERS

Date of Oral Examination:	
Overall Comment given: Minor Corrections () Major Corrections ()) (please tick as
appropriate)	
Time span allocated:	

PART III: DECLARATION BY SUPERVISOR(S) OVERSEEING CORRECTIONS

I /We, the undersigned supervisor(s) overseeing the corrections / revisions of the Thesis/Project					
Report as advised by the candidate's Board of Examiners do hereby declare that all the					
corrections /revisions have been effected as required () / have not been effected as required ()					
to the satisfaction (<i>please tick as appropriate</i>)					
Other remarks:					

.....

NAME:(CORRECTION	SIGN: SUPERVISOR I)	DATE:
NAME:	SIGN:	DATE:

(CORRECTION SUPERVISOR II)

PART III: CONFIRMATION BY THE DEAN OF SCHOOL/FACULTY

I hereby do confirm that the supervisor(s) appointed to oversee the candidate doing the corrections/revisions on the Thesis/Project Report has/have done so as per the instructions of the candidate's Thesis/Project Board of Examiners



Name of DeanDateDate

PART IV: COMMENTS BY THE DIRECTOR SCHOOL OF GRADUATE STUDIES

Authority for final binding of thesis is hereby granted/ not granted (*delete appropriately*)

NAME ______Signature: DATE & STAMP ______ DIRECTOR (SGS)

NB: Five copies of the hard-bound Thesis/Project report together with a backup soft copy should be submitted to the Director, School of Graduate Studies for distribution to the different stakeholders.

