	TECHNICAL UNIVERSITY OF MOMBASA			
UNIVERSITY On	Document: Form		Ref No.: TUM/Form/SGS/016	
PSVBIMO	Title: REQUEST FOR CHANGE OF SUPERVISOR			
	Department: SCHOOL OF GRADUATE STUDIES			
	Issue No. 1	Revision No. 0	Date: 4th August 2016	

The Higher Degree Regulations require each student to have a principal and co-supervisor appointed from within the school. Therefore, if a change of a principal or co-supervisor is proposed, please complete this form and send it to the Director of SGS to be approved.

SECTION A

To be completed by the student

Name	:	Reg. No.	:
Degree Programme	:	School	:
Date of Change	•		

Current	:	
Supervisor(s)	:	
	:	
Proposed New	:	
Supervisor(s)	:	
	:	
Reason for Proposed Change		

SECTION B

To be completed by the Dean of the School/Faculty

I approve the change of Supervisor(s) as detailed above.			
Signed	:	Date	:

(Dean of School/Faculty)

SECTION C

To be completed by the Director of School of Graduate Studies

I approve the change of Supervisor(s) as detailed above.

Signed	:	Date	:	
(Director, SGS)				

TUM is ISO 9001:2015 Certified

Once completed, please return to the Research Student Administration Office

