

FORM FOR INITIAL SUBMISSION OF DISSERTATION/CDP

To be filled by the candidate submitting Dissertation/CDP

Please complete this supervisor(s) signature	form and handover to the (s).	Course/	Program Coordina	tor after obtaining the	
Student's Name (With Initials):	Mr./Ms.				
Registration No.:					
Degree Program:					
Department:					
Year/ Intake:		Date of C	ommencement:		
Maximum duration ends on:			tional extension If yes, give details		
Research/CDP Title:					
Submitted copy/copies of dissertation/CDP. I have paid all the fees prescribed for the Degree for which this dissertation is submitted. (Copies of receipts/ proof of payment attached).					
Signature of Student			Date		
I/We confirm that this student has completed the research project/design project under my/our supervision and submission of examinable dissertation/design project is recommended.					
Plagiarism similarity score for the dissertation (please attach the relevant report):					
Name of Supervisor (s)		Signatu	re	Date	

To: Head/ Department of	
The candidate has satisfied the requirements o	f the rules and regulations of the degree, and conditions laid
down by the Senate at the time of his / her regi	stration and any later dates.
The above candidate has submitted copie	es of his / her dissertation/CDP. Please make arrangements to
send them to the Dissertation/CDP examiners. T	The members of the Panel of Examiners appointed by the Senate
are (Senate Minute No):
1.	
2.	
3.	
4.	
Signature of Course/Program Coordinator	Date:
o: Director/PGS confirm that this dissertation/design-project	is considered as the examinable copy. Dissertation/CDI
	ths from the date of Initial Examinable Dissertation / CDI
Signature of Head of Department	Date:

Please forward copy of this form with the FINAL DISSERTATION submission form