

DIRECTORATE OF RESEARCH, PUBLICATIONS & POSTGRADUATE STUDIES (DRPS)

Tel: +255 23 2931220/21/22 Fax: +255 23 2931216 Cell: +255 754694029 E-Mail: drps@mzumbe.ac.tz Website: www.mzumbe.ac.tz P. O. Box 63, Mzumbe, TANZANIA.

PHASE ONE-DISSERTATION SUBMISSION FORM

SECTION A: TO BE COMPLETED BY THE CANDIDATE

Your details	
Surname	Student Reg. No
Forenames	
Department	
Degree Programme	
Email and Phone Nos	
Dissertation Title	
Name of Supervisor	
Your Confirmation	My dissertation complies fully with the provisions of the Mzumbe University guidelines for writing thesis and dissertation and other regulations governing research degrees
	➤ I understand that my dissertation will not be accepted if any of the provisions in the guideline mentioned above is not honoured.
	I confirm that all of the work recorded in my dissertations is original unless otherwise acknowledged in the text and by references.
Your Declaration	I hereby declare that I have completed my dissertation, and hereby submit THREE softbound copies of my dissertation and an exact copy in a CD to the Department for examination.
Signed:	Date:

SECTION B: TO BE COMPLETED BY THE SUPERVISORS

I/We hereby confirm that the candidate has completed writing his/her dissertation and that the same has been **checked for plagiarism** and conforms to Mzumbe University requirements. I therefore, approve him/her to submit three softbound copies and an exact soft copy of the same dissertation in a CD to the Department for examination.

1.	Name of Major Supervisor
	Signature of Major Supervisor
	Date:
2.	Name of Co-Supervisor.
	Signature of Co-Supervisor.
	Date:
SECT	TION C: TO BE COMPLETED BY THE (HEAD OF) DEPARTMENT
to subs (signed plagian	by confirm that the candidate successfully completed his/her coursework and qualifies mit his/her dissertation for examination. Three softbound copies of his/her dissertation d by the supervisor (s)), an exact copy of the same dissertation in a CD and a copy of rism report with similarity index equal or less than 30% generated by turnitin software been received by:
	Name:
	Designation:
	Signature:
	Date: