

F-2-11-3-1

JOMO KENYATTA UNIVERSITY

OF

AGRICULTURE AND TECHNOLOGY

Board of postgraduate studies

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INTENT TO SUBMIT THESIS

SECTION A: TO BE COMPLETED BY THE CANDIDATE

Name of Candidate & Reg. No.				
Contacts. (Email &Phone)				
School/ Institute				
Degree registered for:				
Title of Thesis				
Date intended to submit thesis**				
PUBLICATIONS	•			
(i) Number of papers published in refereed journals (indicate Journal impact factor)				
(ii) Departmental/ School Seminars Presented.				
Signature of Candidate		Date:		

**Date of submission must be within two months from the date of acceptance of the intent to submit

SECTION B (DECLARATION)

The thesis to be submitted has not previously been submitted for examination for any degree and is not concurrently submitted in candidature for any degree. This thesis is the result of my own independent research/investigation, except where otherwise stated. Other sources are acknowledged through clear references.

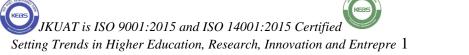
Candidate's Signature	Date

Supervisor Approval (This thesis is to be submitted with our approval).

Supervisors	Signature	Date
1 st supervisor:		
2 nd supervisor:		
3 rd supervisor:		

Department and School/Directorate Approval:

COD Approval	Signature	Date
DEAN/Director	Signature	Date



SGS-04-10-04/11