

	TECHNICAL UNIVERSITY OF MOMBASA	
	Document: Form	Ref No.: TUM/Form/SGS/017
	Title: BOARD OF EXAMINERS ASSESSMENT REPORT	
	Department: SCHOOL OF GRADUATE STUDIES	
	Issue No. 1	Revision No. 0
Date: 5th April 2018		

1. This form is to be signed and returned immediately following the meeting of the Board of Examiners to director, Board of Postgraduate Studies. Distribute copies to the University Supervisor, the department, and the candidate.
2. When the committee’s recommendation is not unanimous, or when the candidate fails, an explanation must be provided within the “Remarks” Section or in attached memorandum.

3.	Reg. No.	
4.	Name	
5.	Department	
6.	Title of Thesis	
7.	Faculty	
8.	Supervisor(s)	1. 2. 3.
9.	Degree Program	
10.	Board of Examiners Met on:	
	Date:	

11. It is the recommendation of the board that: (tick one)

- (i) The degree should be awarded (subject to attached minor corrections)
- (ii) The degree should be awarded (subject to attached major corrections)
- (iii) The degree should not be awarded (until satisfactory revision is done)
- (iv) That result should be deferred

12. (a) Name of Supervisor for Correction: _____

(b) Supervisors for Revision (i) _____

(ii) _____

13. REMARKS:



BOARD OF EXAMINERS' REPORT FOR THE PHD. DEFENSE BY:

NAME:

REG. NO.

14. MEMBERS OF BOARD OF EXAMINERS

NAME

SIGNATURE

Chairman

External Examiner

Internal Examiner

Board Member

Board Member

Board Member

Board Member

Board Member

Board Member

