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## TECHNICAL UNIVERSITY OF MOMBASA

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Title: INTENTION TO RE-SUBMIT THESIS/PROJECT

**Department: SCHOOL OF GRADUATE STUDIES** 

Issue No. 1 | Revision No. 0 | Date: 5th April 2018

To be completed **two months** before student's intended re-submission date, in order for SGS to formally notify the examiners to be prepared to receive and re-examine the thesis.

SECTION A – To be completed by the candidate

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## I certify that:

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- The thesis does not exceed the permitted word length (see handbook)
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I understand that the assessment of my thesis will be undertaken by the duly appointed examiners, and I accept that the approval of my application for entry to the research degree examination does not imply or constitute any judgement as to the academic standard of the thesis by any signatories to this application form.



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(Student)  SECTION B – To be completed by the Principal Supervisor  I certify that the details provided by the student in Section A are correct.  If you are unable to certify the above, please explain the reason below:						
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