

UNIVERSITY OF NAIROBI

FACULTY OF BUSINESS AND MANAGEMENT SCIENCES

PHD PROGRAM - LOWER KABETE CAMPUS

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CERTIFICATE OF CORRECTION

CENTIFICATE OF CONNECTION
Name of Candidate õõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõ
Registration Number õõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõ
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Field of Study õõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõõ
The above named candidate has completed the corrections required in his/her thesis as required.

He/she has my permission as the supervisor, to submit to the Faculty of Business and Management Sciences a soft copy of the final thesis in PDF format to enable him/her join the list of graduands in this years graduation ceremony.

Supervisor's Name	Date:
Signature	Date:
APPROVED FOR SUBMISSION BY: DEAN, FACUL'SCIENCES	TY OF BUSINESS AND MANAGEMENT
Signature	Date: