



UNIVERSITY OF NAIROBI
FACULTY OF BUSINESS AND MANAGEMENT SCIENCES
DOCTORAL STUDIES PROGRAMME
PhD PROPOSAL/THESIS SUPERVISION ALLOCATION FORM

SECTION A: (To be completed by the student)

Name of student..... Reg. No.:

Mobile phone: Email:

Proposed Title of the Proposal/Thesis:

Name of Preferred Supervisor(s) (i)(ii)(iii)

(Proposed supervisor is only a guide and does not guarantee that proposed supervisor will be allocated)

Department: Management Science [] Finance & Accounting [] Business Administration []

Specialization (Tick as appropriate)

- | | | |
|-------------------------------------|-----|---------------------------|
| i) Marketing | [] | dept-busadmin@uonbi.ac.ke |
| ii) Human Resource Management | [] | dept-busadmin@uonbi.ac.ke |
| iii) Strategic Management | [] | dept-busadmin@uonbi.ac.ke |
| iv) International Business | [] | dept-busadmin@uonbi.ac.ke |
| v) Entrepreneurship | [] | dept-busadmin@uonbi.ac.ke |
| vi) Finance | [] | dept-acc@uonbi.ac.ke |
| vii) Accounting | [] | dept-acc@uonbi.ac.ke |
| viii) Operations Management | [] | dept-mgtsci@uonbi.ac.ke |
| ix) Strategic Information Systems | [] | dept-mgtsci@uonbi.ac.ke |
| x) Global Management | [] | dept-mgtsci@uonbi.ac.ke |
| xi) Project Planning and Management | [] | dept-mgtsci@uonbi.ac.ke |

Note:

- Each student **MUST** fill in the attached declaration form on plagiarism and collusion.
- Original Transcript, Fees Statement and Synopsis are supposed to be attached to this form. This form is available in the Departments, FOBMS website or PhD office in University Towers (9th Floor) Students get their copy later from the PhD Office after allocation is done.

Signature of Student: Date:

SECTION B: (For Official Use only. To be completed by DSC)**i) Name of Supervisors Allocated:**

Lead Supervisor: Mobile No.:

*No. of students allocated this academic year:

Co-Supervisor (1): Mobile No.:

*No. of students allocated this academic year:

Co-Supervisor (2): Mobile No.:

*No. of students allocated this academic year:

ii) Proposed Presentation Dates:

Departmental:

Open Forum:

Doctoral Committee:

Fieldwork (4 semesters):

Signed: Chairman of Department

Name..... Signature: Date:

Approved by: Associate Dean, GBS

Name..... Signature: Date:

*** To be filled by the departmental secretaries before forwarding the form to the Chairman.**

- NOTE:**
1. A student shall not commence proposal writing before allocation of University supervisor
 2. Final Thesis should be submitted at least four (4) months before the date of graduation.