

Higher Degrees Committee

1. MNU STAFF
First name:

Other names:

Appointment Rank:

PhD Supervisor Registration Form

This form is to be used by potential supervisors of PhD candidates to express their interest and willingness to supervise. Please fill the form and email it to

| Email: | | | ID Card: |
|---|--------------------------------|---------------|------------------------|
| Department/Faculty: | | | |
| 2. EXTERNAL SUPERVIS | SORS | | |
| First name: | | | |
| Other names: | | | |
| Email: | | | |
| Phone numbers: | | | |
| If adjunct to a Faculty, Faculty name: | | | |
| 3. ALL SUPERVISORS Please include a CV with t | his application | | |
| Your highest qualification | : " " | 1 | |
| Year: | | University: | |
| Highest academic qualifie | ed student that you have succe | essfully supe | ervised to completion. |
| Name: | | Degree: | |
| Institution: | | Year conf | erred: |
| Related period of supervi | ision, e.g.: 2 years | | |
| Details of two most recen | nt publications: | | |
| Botano or two moot room | | | |
| | | | |
| | | | |

Please include a CV with this application

4. REGISTRATION DETAILS

| Please indicate the level of registratio (Note: generally supervisors may only Faculties/Centres may make a special | supervise at the same level as the | qualification they hold. Heads of |
|---|--|-----------------------------------|
| Are you willing to supervise: | Masters? | PhD? |
| What level of involvement? | Principal supervisor? | Co-supervisor? |
| Please use the form to indicate the ar | eas of the discipline that you feel co | nfident to supervise. |
| AREAS you are willing to supervise studies, educational administration, co | | opment, science education, policy |
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| | | |
| Applicant's name: | | |
| Applicant's signature: | | Date: |
| Name of Faculty/Centre head: | | |
| Faculty/Centre head's signature | | Date: |
| HDC Approval Date | | |

Approved by HDC on: 27th November 2012