

TANZANIA INSTITUTE OF ACCOUNTANCY (TIA)

The Office of Deputy Rector Academic, Research & Consultancy

NOTICE OF INTENTION TO SUBMIT A THESIS/DISSERTATION AND EXAMINATION ARRANGEMENTS*

SECT	TON A: TO BE COMPLETED BY THE CANDIDATE					
1)	Name in full:					
2)	Registration number:					
3)	3) Department:					
4)	Programme registered for:					
5)	Title of thesis/dissertation:					
6)	Name(s) of Supervisor(s):					
7)	I hereby declare that I have completed my thesis/dissertation research, and intend to					
	submit my thesis/dissertation within the coming one month.					
	Signature of Candidate					
SECT	TON B: TO BE COMPLETED BY SUPERVISOR(S)					
8)	I/We hereby confirm that the candidate is in the process of drafting his/her					
	thesis/dissertation and I am/ we are of the opinion that she/he should be in a position to					
	submit the thesis/dissertation within one month from now.					
	Signature of Supervisor: Date:					
	Signature of Supervisor: Date:					

SECTION C: TO BE COMPLETED BY THE HEAD OF DEPARTMENT

After consultation with the supervisor(s) of the candidate, I propose that the following should be the considered for appointment as examiners for the candidate's thesis/dissertation:

9) Potential External Examiners					
Name:					
Affiliation: Postal Address:					
Email:					
Curriculum Vitae: Attached Not attached					
10) Proposed Internal Examiners					
Name:					
Affiliation:					
Postal Address:					
Telephone:Fax					
Email:					
Curriculum Vitae: Attached Not attached					
SECTION D: TO BE FILLED FOR APPROVAL BY THE DRARC OFFICE					
Please Tick					
The examination arrangements herewith are complete and are approved.					
The examination arrangements are not complete for the reasons stated below, and are hereby referred back to the Section/Institute Directorate					

The following items are missing or incomplete:

	Signature:	Date	•••••	
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MP FORM 06

To be filled in triplicate one copies of this form MUST be returned to the Director of Academic Affairs (DAA)