



DIRECTORATE OF GRADUATE STUDIES, RESEARCH AND INNOVATIONS

BU/DGSRI.F22

NOMINATION OF ASSESSORS FOR A DOCTORAL CANDIDATE

Title, initials and surname Student number Year first registered for PhD Title of dissertation 2. SUPERVISOR(S) INFORMATION Supervisor Title, initials and surname Email address Phone number Work Home Cell Department Occupation and institution [if external]	1. STUDENT INFORMATION								
Year first registered for PhD Title of dissertation 2. SUPERVISOR(S) INFORMATION Supervisor Title, initials and surname Email address Phone number Work Home Cell Department Occupation and institution [if external]	Title, initials and surname								
Title of dissertation 2. SUPERVISOR(S) INFORMATION Supervisor Title, initials and surname Email address Phone number Work Home Cell Department Occupation and institution [if external]	Student number								
2. SUPERVISOR(S) INFORMATION Supervisor Title, initials and surname Email address Phone number Work Home Cell Department Occupation and institution [if external]	Year first registered for PhD		Subject						
Supervisor Title, initials and surname Email address Phone number Work Home Cell Department Occupation and institution [if external]	Title of dissertation								
Title, initials and surname Email address Phone number Work Home Cell Department Occupation and institution [if external]	2. SUPERVISOR(S) INFORMATION								
Email address Phone number Work Home Cell Department Occupation and institution [if external]	Supervisor								
Phone number Work Home Cell Department Occupation and institution [if external]	Title, initials and surname								
Department Occupation and institution [if external]	Email address								
Occupation and institution [if external]	Phone number Wor	k	Home		Cell				
[if external]	Department								
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Highest qualification obtained	Highest qualification obtained								
Co-supervisor	Co-supervisor								
Title, initials and surname	Title, initials and surname								
Email address	Email address								
Phone number Work Home Cell	Phone number Wor	k	Home		Cell				
Department	Department								
Occupation and institution [if external]									
Highest qualification obtained	Highest qualification obtained								

3. GUIDELINES FOR THE APPOINTMENT OF AN ASSESSOR

- Where no consensus can be reached by the examiners as to the outcome of the examination of a PhD dissertation (during the oral examination), two independent assessors are appointed.
- The independent assessors are appointed by the non-examining chair in consultation with the supervisor(s) on an ad hoc basis for each dispute case.
- The process is managed by the non-examining chair of the examination panel, who acts in accordance with the Faculty's established practices for processing examination results.

- One independent external assessor should be a senior academic appointed at any other university or research institution; while the other independent external assessor should be a senior academic appointed at any international university or research institution outside Uganda.
- Both independent external assessors must be experts in the specific area/field/topic raised by the dissertation.
- A person who was previously associated with or appointed at Busitema University must have not been in service of this university for a period of at least three years before that person can be appointed as an independent external assessor.
- The faculty Dean's office is responsible for sending the copy of the dissertation, copies of examiners' and supervisor's reports and necessary documentation to the independent assessors.
- IMPORTANT: Only an electronic version of the dissertation and supporting documents will be sent to the assessors, who are welcome to print their own hard copies.

Independent external assessor 1 (Uganda)

Title, initials and surname									
Email address									
Secondary email address									
Phone number	Work		Home		Cell				
Institution									
Department / Occupation									
Highest qualification obtained									
Independent external assessor 2 (International)									
Title, initials and surnam	ne						•		
Email address									
Secondary email address									
Phone number	Work		Home		Cell				
Institution									
Department / Occupation									
Highest qualification obtained									
Signature of Departmental Chair				Date	e				

[This completed and signed form must be emailed to dgsri@adm.busitema.ac.ug, preferably in Word format]