

KIBABII UNIVERSITY
SCHOOL OF GRADUATE STUDIES
ACADEMIC PROGRESS REPORT

PERIOD COVERED: From:..... To:..... (Dates)

PART A: TO BE FILLED IN BY CANDIDATE

1) Name of Candidate:.....

2) Registration Number:

3) Department/ Faculty:.....

4) Degree/Diploma Proposed:.....

5) Nature of Programme (Tick one):

<input type="checkbox"/>	By Research and Thesis
<input type="checkbox"/>	By Course-work and Dissertation

6) Date of Registration:

7) Planned Date of Completion:.....

8) Name of Supervisor (s): 1.
2.....

PART B: TO BE FILLED IN BY SUPERVISOR

9) Name of Supervisor:.....

10) When were you appointed to supervise the candidate?

11) If you have just been appointed, did the previous supervisor hand you any report of the candidate?

- Yes
- No
- Not applicable



12) How often have you met the candidate during the quarter under report?
 If you have not met, give reasons.....

13) What progress has the candidate made? (Tick in the appropriate box)

Item	Nothing	About a third	Half way	Nearly completed	Completed
Literature Review					
Designing of Methodology					
Getting supplies for study					
Data collection					
Data Analysis					
Writing of Dissertation/Thesis					
Submission					

14) In your opinion, is the candidate making satisfactory progress? Yes/No

15) Will he/she need an extension? Yes/No. How long?months

16) Any other comments you may wish to make on the candidates:

Signature of supervisor:..... Date:.....

PART C: TO BE FILLED IN BY CHAIRPERSON DEPARTMENTAL GRADUATE SCHOOL COMMITTEE

17) Comments on the Candidate's Progress report:

18) Comments on the Supervisor's Progress report:



Name of DGSC:

Date: Signature of DGSC:.....

PART D: TO BE FILLED BY CHAIRPERSON, FGSC/SGSC

19) Comments on the overall report:
.....
.....
.....

Name of Chairperson, FGSC/SGSC:

Date:..... Signature:

PART E: TO BE COMPLETED BY THE DEAN SCHOOL OF GRADUATE STUDIES

20) The candidate has paid all/part/not paid his/her fees

21) Financial Sponsor:

22) Other remarks/actions.....
.....
.....

Name of Chairperson, Senate Higher Degrees Committee:

Date: Signature:.....

N/B: This form should be filled in triplicate.

