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**MPH2**

**SHSPH SUBMISSION FORM FOR MASTER OF PUBLIC HEALTH MINI-DISSERTATION**

**NB:** This form must be completed and submitted together with electronic copies of the mini-dissertation (MSWord format as well as PDF format) to Kgomotso Modingoana (kgomotso.modingoana@up.ac.za), who will submit it to Student Admin to send to the examiners.

**PERSONAL DETAILS:** (Please print)

|  |  |  |  |
| --- | --- | --- | --- |
| **TITLE:** Prof/Dr/Mr/Mrs/Miss\* |  | **STUDENT NUMBER:** |  |
| **SURNAME:** |  |
| **FIRST NAME:** |  |
| **HOME** **TEL:** |  | **CELL NR:** |  |
| **EMAIL Address:** |  | **WORK** **TEL:** |  |

**DETAILS OF MINI-DISSERTATION**

|  |  |
| --- | --- |
| **SUPERVISOR:** |  |
| **CO-SUPERVISOR:** |  |
| **TITLE OF MINI-DISSERTATION:** (exactly as approved including capital letters, small letters and punctuation) |
|  |
| **Please Indicate:** | **Traditional mini-dissertation format** |  | **Article-based mini-dissertation format** |  |

***Please check the following before submission:***

* I am registered for PHR 870.*

* I have checked that my research report has all the required appendices. (Ensure all documents are signed)*

* I have submitted the data used for my study for storage at the SHSPH. (Hard copies and CD with electronic data to Kgomotso Modingoana)*

**STATEMENT BY CANDIDATE:**

I declare that the mini- dissertation, which I hereby submit for the degree Master of Public Health at the University of Pretoria, is my own work and has not previously been submitted by me for a degree at another university.

I am aware that, should the mini-dissertation be accepted, I must submit the additional **leather bound copy** as required by the relevant regulations at least six weeks before the next graduation ceremony, and that the degree will not be conferred if this requirement is not fulfilled.

CANDIDATE SIGNATURE:………………………………………………………. DATE:……………………………………….….

**STATEMENT BY SUPERVISOR /CO-SUPERVISOR:**

I declare that I hereby approve that this student may submit his/her mini-dissertation. The co-supervisor has agreed to the submission. I also confirm that the student has submitted the data used for their study for storage

SUPERVISOR SIGNATURE:……………………………………………………..…. DATE:…………………………………….

CO-SUPERVISOR SIGNATURE:…………………………………………………… DATE:…………………………………….