**UNIVERSITY OF PRETORIA**

**FACULTY OF NATURAL AND AGRICULTURAL SCIENCES**

**PROPOSAL OF THESIS/DISSERTATION TITLE AND NOMINATION OF SUPERVISOR/S AND EXAMINERS**

**Must be finalised at least three months before examination copies are submitted.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Surname** | **Initials** | **Title** | **Supervisor** | **\*\*Examiners**  |
|  |  |  | **Title, initials and surname** |  | **Internal** | **Title, initials and surname** |  |
| **EMPLID** |  | **EMPLID or Affiliation‡** |  |
| **Student no.** |  | **Department**  |  | **Address** |  |
| **Degree programme** |  | **Email** |  | **Phone** |  |
| **Department** |  | **\*Co-supervisor(s)** | **Email** |  |
| **Planned date for sub-mission of exam copies?**  |  | **Title, initials and surname** |  | **External** | **Title, initials and surname** |  |
| **EMPLID** |  | **Affiliation‡** |  |
| **Ethics approval granted?**  | **YES** |  | **NO** |  | **N/A** |  | **Department** |  | **Address** |  |
| **Ethics number** |  | **Email** |  | **Phone** |  |
| **Student e-mail** |  | **Title, initials and surname** |  | **E mail** |  |
| **Field of study**  |  | **EMPLID**  |  | **External** | **Title, initials and surname** |  |
| **Department** |  | **Affiliation‡** |  |
| **Was the UP experimental farm used?** | Y |  | N |  | **Email** |  | **Address** |  |
| **Proposed title** |  | **Phone** |  |
| **E mail** |  |

 **\*Attach a motivation and a comprehensive CV for co-supervisors not employed by the University of Pretoria. ‡Affiliation in English**

|  |  |
| --- | --- |
| Y | N |

**\*\*Dissertation:** Nominate an internal and an external examiner - or two external examiners if an internal examiner is not available.
 **Thesis:** Nominate an internal and two external examiners, with one from outside South Africa. Nominate three external examiners if an internal examiner is not available.

**Supervisors:** Do you confirm that you have not co-published with the external examiner/s in the past five years? (Provide a letter of motivation for exceptional cases.)

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| --- | --- | --- | --- | --- |
|  | **Supervisor** | **Co-supervisor**  | **Head of Department**  | **Chairperson:****Postgraduate Studies Committee** |
| **Name** |  |  |  |  |
| **Signature** |  |  |  |  |
| **Date** |  |  |  |  |