

# UGANDA CHRISTIAN UNIVERSITY

*"A Centre of Excellence in the Heart of Africa"*

## School of Research and Postgraduate Studies

P.O. BOX .....

.....

TEL.....

The Dean,  
Faculty of .....  
Uganda Christian University,  
**P.O. Box 4, Mukono.**

*Thru:*  
The Supervisor

Dear Sir / Madam,

### **SUBMISSION OF DISSERTATION/THESIS FOR EXAMINATION**

I hereby submit my dissertation/thesis entitled .....

.....

.....

for examination for the award of the degree of ..... in .....

.....

of Uganda Christian University.

NAME OF CANDIDATE: ..... REG NO .....

SIGNATURE: .....

DATE: .....

NAME OF THE SUPERVISOR: .....

SIGNATURE: .....

DATE: .....

***(TO BE FILLED AND SUBMITTED IN TRIPLICATE)***