

Form RDRF

Reference Form

Section to be filled by Applicant:				
Address				
Telephone and/or Email Address				

Dear Referee,

The above -named candidate is applying for admission to a research degree. Your completion of this confidential form will greatly help us in the assessment of the applicant's suitability to undertake the proposed study. Please enclose the completed form in a sealed envelope and forward it to the student for onward transmission to the Admissions' Office

I I have known the candidate: Please tick or fill in as appropriate.				
	1 year			
For a period of	2 years			
	3 years			
	More than 3 years			
	Lecturer			
	Project/Thesis Supervisor			
In my capacity as	Others, please specify			

The rating below indicates my assessment of applicant's performance and potential in II comparison with other student's with the same level of education and experience with whom I have been associated for the past five years.

Please complete this section by ticking appropriate boxes.

	Excellent	Very Good	Good	Average	Below Average
Academic					
Achievement					
Intellectual Ability					
Capability for					
Original Thinking					
Capability to Work					
Independently					
Writing Skills					
Motivation for					
Research Work					

III Please indicate in the space provided below your opinion on the applicant's potential to undertake advanced research in the chosen field of study.

You may wish to consider the applicant's:

(i) Qualifications

(ii) Motivation

(iii) Ability to read, write and give oral presentations.

Referee's Name	Position	
		Date
Institution	Signature	



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Form SA1

Supervisor Agreement Form 1

(To be submitted together with Application Form)

Faculty/Centre:			
Applicant's Name:			
Full-Time/Part-Time	F/T:		P/T: 🗆
Programme of Study:	MPhil	MPhil/PhD	PhD 🗆
Research project will be:	Fully Sponsored	Partially Sponsored	Self-Sponsored
Does applicant need to audit module(s) related to his/her research studies	Yes 🗆		No 🗆
If Yes, please specify the name(s) of the module(s)			
If sponsored, please indicate th	e Sponsoring Institutio	n/Department:	
Title of Synopsis: <25 words			
Field of Specialisation http://www.uom.ac.mu/images/ Files/Research/ResearchStudents /themes.pdf			

I/we certify that I/we support the proposal

In addition, please tick where appropriate:

- The research proposal submitted is feasible <u>taking into account availability of resources and</u> <u>cost evaluation</u>
- The research proposal does not require any (other) associate/co/external supervision(s)

I/we have expertise/competence in this field (or related) field of research

	Name of Supervisor(s)	Specify Main/Co /Assoc	Internal/ External	Area(s) of Expertise	PhD (Years)	Signature	Date
1							
2							
3							

Supervisor(s) - Please attach a list of your publications/related publications.

* Guidelines: http://www.uom.ac.mu/Images/Files/Regulations/MPhilPhD/2016_2017/guide.pdf



UNIVERSITY of MAURITIUS

Form SPF

Student's Progress Form

Please refer to the University Guidelines for Students Registered for Postgraduate Research Programmes. This Report will be used by the Faculty Research Committee, as a tool for the monitoring of MPhil/PhD Research Programmes. The assessment made thereon will, constitute the official notification for re-enrolment for the period ending January/August.

TO BE COMPLETED BY ALL REGISTERED MPHIL/PHD STUDENTS. PLEASE FILL IN THE FORM AND SUBMIT TO YOUR SUPERVISOR(S)

Please use additional paper where necessary for comments/details, etc.

Faculty/Centre:

Student's Name:

Student ID:

A

A1	Are you currently undertaking coursework, as part of the registered Programme of Studies? If Yes, please specify which module(s).	Yes No N/A	
A2	If you are currently undertaking coursework as part of the registered Programme of Studies, are you satisfied with the arrangements made? If No, please comment.	Yes No N/A	
A3	Frequency of meetings with the Supervisor. If Other, please comment.	Weekly Fortnightly Monthly Other	
A4	Have you experienced any academic or personal problem, which has affected your progress during the period of registration? If Yes, indicate the nature of problems affecting progress of research work.	Yes No N/A	
A5	Are you satisfied with the Faculty provisions for the timely allocation of resources / facilities. If No, please give details, which may assist in prompt problem solving by the Faculty Research Committee?	Yes No N/A	
A6	Are you satisfied with the Faculty provisions on Safety Issues? If No please comment.	Yes No N/A	

A 7	Have you submitted any research material for research seminars/conferences/workshops? presentation, dates, etc.)	Yes No N/A					
A8	Overall, are you satisfied with the Faculty pro research programme of study? If No, please of	Yes No N/A					
A9	A9 How far have you been able to attain your plan mentioned in the progress report? Please indicate your plan with respect to the publication of research papers and/or other research-related activities (eg seminar/ poster presentation, conference attendance etc.)?						
	Student's Name	Signature	Date				
В	TO BE FILLED BY THE SUPERVISOR TO THE DEAN OF FACULTY	(MAIN OR CO-SUPERVISOR) ANI	D TO SUBMIT				
B B1	TO BE FILLED BY THE SUPERVISOR TO THE DEAN OF FACULTY I/we have read the above and wish to ma	· · · ·	D TO SUBMIT				
	TO THE DEAN OF FACULTY	ke the following comments, if any.	D TO SUBMIT Yes				
B1	TO THE DEAN OF FACULTY I/we have read the above and wish to ma Has the student shown consistent and satisfar registration? If the answer is No, indicate the of research work. Given the student's progress and scope of completion date. Do not fill if not applicable.	ke the following comments, if any. ctory progress during the period of nature of problems affecting progress of research programme, please provide	Yes No				
B1 B2	TO THE DEAN OF FACULTY I/we have read the above and wish to ma Has the student shown consistent and satisfaregistration? If the answer is No, indicate the of research work. Given the student's progress and scope of completion date. Do not fill if not applicable. Date: SUPERVISOR'S RECOMMENDATION	ke the following comments, if any. ctory progress during the period of nature of problems affecting progress of research programme, please provide	Yes No an <i>anticipated</i> thesis				
B1 B2 B3	TO THE DEAN OF FACULTY I/we have read the above and wish to ma Has the student shown consistent and satisfauregistration? If the answer is No, indicate the of research work. Given the student's progress and scope of completion date. Do not fill if not applicable. Date: SUPERVISOR'S RECOMMENDATION (Please tick the appropriate box below)	ke the following comments, if any. ctory progress during the period of nature of problems affecting progress of research programme, please provide	Yes No an <i>anticipated</i> thesis				
B1 B2 B3	TO THE DEAN OF FACULTY I/we have read the above and wish to ma Has the student shown consistent and satisfauregistration? If the answer is No, indicate the of research work. Given the student's progress and scope of completion date. Do not fill if not applicable. Date: SUPERVISOR'S RECOMMENDATION (Please tick the appropriate box below)	ke the following comments, if any. ctory progress during the period of nature of problems affecting progress of research programme, please provide	Yes No an <i>anticipated</i> thesis				
B1 B2 B3	TO THE DEAN OF FACULTY I/we have read the above and wish to ma Has the student shown consistent and satisfar registration? If the answer is No, indicate the of research work. Given the student's progress and scope of completion date. Do not fill if not applicable. Date: SUPERVISOR'S RECOMMENDATION (Please tick the appropriate box below) PERIOD ENDING	ke the following comments, if any. ctory progress during the period of nature of problems affecting progress of research programme, please provide I ON STATUS OF STUDENT'S REG NG JANUARY/AUGUST	Yes No an <i>anticipated</i> thesis				
B1 B2 B3	TO THE DEAN OF FACULTY I/we have read the above and wish to ma Has the student shown consistent and satisfar registration? If the answer is No, indicate the of research work. Given the student's progress and scope of completion date. Do not fill if not applicable. Date: SUPERVISOR'S RECOMMENDATION (Please tick the appropriate box below) PERIOD ENDIN Ongoing [MPhil or PhD] Transfer to PhD [Refer to Universit	ke the following comments, if any. ctory progress during the period of nature of problems affecting progress of research programme, please provide I ON STATUS OF STUDENT'S REG NG JANUARY/AUGUST	Yes No an <i>anticipated</i> thesis				

Signature

Date

* The main/local Supervisors should sign

Name of Supervisor(s) *

Form RDDC



UNIVERSITY of MAURITIUS

Transfer Report/Thesis Declaration Form

Faculty/Centre				
Student's Name:				
Student ID:				
Date of Registration:				
Programme of Study:	MPhil		MPhil/PhD	PhD 🗌
Full-Time/Part-Time	Fi	ıll-time		Part-Time
Title of Thesis:				
Area of Specialisation:				
Name of Supervisor(s):				

Declaration of Student:

In accordance with the appropriate regulations, I hereby submit the above thesis for examination and I declare that:

- (i) I have read and understood the sections on **Plagiarism** found in the University's "Handbook on Rules, Regulations and Procedures Governing MPhil/PhD Programmes (20.../20...)" and certify that the thesis embodies the results of my own work.
 (ii) I have no objection to submit a soft copy of my thesis through the Turnitin Platform. I confirm that the hard
- copies and soft copies, including the one uploaded through the Turnitin Platform, in the final assignment submission link indicated by the Main Project Supervisor, are identical in content.
- (iii) I have adhered to the 'Harvard system of referencing' or a system acceptable as per "The University of Mauritius Referencing Guide" for referencing, quotations and citations in my dissertation. Each contribution to, and quotation in my thesis from the work of other people has been attributed, and has been cited and referenced.
- (iv) I have not allowed and will not allow, anyone to copy my work with the intention of passing it off as his or her own work.
- (v) I am aware that I may have to forfeit the degree in the event that plagiarism has been detected after the award.
- (vi) Notwithstanding the supervision provided to me by the University of Mauritius, I warrant that any alleged act(s) of plagiarism during my stay as registered student of the University of Mauritius is entirely my own responsibility and the University of Mauritius and/or its employees shall under no circumstances whatsoever be under any liability of any kind in respect of the aforesaid act(s) of plagiarism.
- (vii) Research work has IPR with potential for commercialization. Yes D No D

Student's Signature

Date

Declaration of Supervisor(s)*: I/we certify that all necessary corrections have been completed satisfactorily

Signature of Supervisor(s)

Date

* The main/local Supervisors should sign.



UNIVERSITY of MAURITIUS

Form RDT1

Notification for Transfer from MPhil to PhD

Faculty/Centre:				
Student's Name:				
Student ID				
Date of Registration:				
		_		_
Full-Time/Part-Time:	Full Time		Part-Time	
Full-Time/Part-Time: Title of Research:	Full Time		Part-Time	

Please attach abstract in electronic version

Name of Supervisor(s)				
The research work has I	PR with potential for c	ommercialisation.	Yes 🗆	No 🗆
Student's	Name	Signature	D	ate
Read and Approved by S	upervisor *			

 	<u> </u>	
Name(s)	Signature(s)	Date

	Submit to: Faculty's Registry
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* The main/local Supervisors should sign



Form RDT2(A)

External Assessor's Recommendation

External Assessor's Name:	
Student's Name:	
Student ID:	
Title of the MPhil Transfer Report:	

Please make one of the following recommendations:

• Transfer to PhD	
• Revision and resubmission for a transfer to PhD to the satis	faction of the Supervisor \Box
• Revision and resubmission for a transfer to PhD to the satis	faction of the External Assessor \Box
• Revision and resubmission for an MPhil degree only to the s	satisfaction of the Supervisor \Box
• Revision and resubmission for an MPhil degree only to the s	satisfaction of the External Assessor \Box

External Assessor	Signature	Date



Form RDT2(B)

External Assessor's Report

External Assessor's Name:	
Student's Name:	
Student ID:	
Title of the MPhil Transfer Report:	

Please give a detailed report on the following:

The student's understanding	of the field of study	and familiarity	with published	work in the field.

An assessment of the report in relation to the research objectives, methodologies and findings.

The general presentation of the report.

External Assessor Signature Date

The External Assessor will provide a list of typographical errors and amendments, if any, to be made to the text.



Form RDE1

Notification for Submission of Thesis

[Submission should be within the three months period]

To be fil	led in consultation v	vith the Supervisor(s)	
Faculty/Centre:				
Student's Name:				
Student ID:				
Date of Registration:				
Full-Time/Part-Time:	Full-Time		Part-Time	
Programme of Study:	MPhil		PhD	
Thesis Title:				
*Area of Specialisation (Keywords only)				
Proposed Date of Submission:				
The research work has IPR with p	otential for commer	cialisation.	Yes 🗆	No 🗆
Enclosed is a two-page abstract in	electronic version			
Student's Name		Signature		Date
Read and Approved by Supervisor	(s) **	8		
Name		Signature		Date

Dean of Faculty	Signature	Date
Submit to:	Registrar's Office, 7th Floor, NAC	

* Full list of 'areas of specialisation' is available at the Faculty's/Centre's Registry.

** The main/local Supervisors should sign.



Form RDE2(A)

External Examiner's Recommendation

External Examiner's Name:		
Student's Name:		
Student ID:		
Programme of Study:	MPhil	PhD
Thesis Title:		

Please make one of the following recommendations:

 External Examiner Signature I	Date
 Reject the Thesis	
Reject the Thesis	
Revision and resubmission to the External Examiner for MPhil degree	
and a person designated by the Deans of Faculty/Officer-in-Charge, CILL	
Revision and resubmission for MPhil degree to the satisfaction of the Supervisor(s)	
and a person designated by the Deans of Faculty/Officer-in-Charge, CILL	
Award of an MPhil degree with amendments to the satisfaction of the Supervisor(s)	
Award of an MPhil degree without amendments	
(in case the examiner is not satisfied with the resubmission, the award will be an MPhil degree)	
Substantial amendments/major revision and re-examination by External Examiner	
and a person designated by the Deans of Faculty/Officer-in-Charge, CILL	
Award of PhD subject to substantial amendments to the satisfaction of the supervisor(s)	
and a person designated by the Deans of Faculty/Officer-in-Charge, CILL	
Award of PhD subject to minor corrections to the satisfaction of the supervisor(s)	
Award of PhD with no corrections	



External Examiner's Report

External Examiner's Name:		
Student's Name:		
Student ID:		
Programme of Study:	□ MPhil	D PhD
Thesis Title:		

The External Examiner's report should include the following:

External Examiner

• Brief description of thesis and summary of the main achievements of the research work.
• Originality of the research and its contribution to the advancement of knowledge in the field.
• Assessment of literacy style and presentation.
 Assessment of the candidate's acquaintance with the relevant literature, mastery of techniques, understanding of scientific methods and his/her capability of assessing the significance of findings logical and correct presentation of results.
• Technical quality of the thesis.
Any additional comments and specific queries on findings.

The External Examiner will provide a list of typographical errors and amendments, if any, to be made to the text.

Signature

Date