



**SOKOINE UNIVERSITY OF AGRICULTURE  
DIRECTORATE OF POSTGRADUATE  
STUDIES, RESEARCH, TECHNOLOGY  
TRANSFER AND CONSULTANCY**

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**SUMMARY RECOMMENDATION FORM ON MASTERS  
DISSERTATION/THESIS/ RESEARCH PAPER  
EXAMINATION**

Name of candidate:.....  
Department:.....  
College/School.....  
Degree registered for.....  
Title of dissertation:.....

**EXAMINER'S RECOMMENDATION\***

1. The degree be awarded subject to incorporation of minor changes and typographical corrections (Score of 60% and above)
2. The candidate be allowed to revise and re-submit the dissertation/Thesis for re-examination (Score of 40 – 59.9%)
3. The dissertation be rejected outright (Score of less 40%)

Name of Examiner:  
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Signature:.....Date  
.....

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\* The minimum pass mark is 60%