



National University of Sciences and Technology

**FORMULATION OF GUIDANCE & EXAMINATION COMMITTEE (GEC)  
(To be filled by Institution)**

Student's Name: \_\_\_\_\_ NUST Regn No: \_\_\_\_\_

Institution: \_\_\_\_\_ Department: \_\_\_\_\_

Area of Research: \_\_\_\_\_

**GUIDANCE & EXAMINATION COMMITTEE MEMBERS**

Supervisor

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Institution /Dept: \_\_\_\_\_ Signature: \_\_\_\_\_

Co-Supervisor (if appointed)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Dept/Organization: \_\_\_\_\_ Signature: \_\_\_\_\_

Committee Members

1. Name: \_\_\_\_\_ Email: \_\_\_\_\_

Dept: \_\_\_\_\_ Signature: \_\_\_\_\_

2. Name: \_\_\_\_\_ Email: \_\_\_\_\_

Dept: \_\_\_\_\_ Signature: \_\_\_\_\_

3. Name: \_\_\_\_\_ Email: \_\_\_\_\_

Organization (External): \_\_\_\_\_ Signature: \_\_\_\_\_

Date of formulation of GEC: \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Student's Signature

**APPROVED**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Head of the Department

**COUNTERSIGNED**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Dean/Commandant/Principal

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- 1 x photocopy to supervisor, student and sponsoring agency