

**LOCAL SUPERVISION FORM FOR UR AFFILIATES**

# INTRODUCTION

The University of Rwanda (UR) like other Universities and Research Institutes is delegated by Rwanda Regulations to affiliate the following types of researchers and facilitate Ethics Clearance and Research Clearance:

1. Researchers from outside Rwanda who are not Rwandan Nationals
2. Researchers who are Rwanda Nationals (either from outside or from within Rwanda) who are not employees of Higher Learning or Research Institutions

# Local supervision for UR affiliates

One of the requirements to be affiliated to UR for international applications is to get a local supervisor from one of the Colleges of the University of Rwanda. The nomination of the local supervisor of the affiliate is done by direct line manager of the supervisor. Though the applicant may suggest the local supervisor to him/her; the decision to confirm or not the supervisor is done by direct line manager. Therefore, after the supervisor is nominated; he/she commits to supervise the affiliate, sign and the line manager sign.

I…………………………………………………………………………………………………………

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……………………………………………………………………………………………………………

…………..(Names of Local supervisor, academic rank, work position, email and telephone number ) from University of Rwanda-College of ………………………………………………………………………………………………………

 commit my-self to supervise (Names

of the affiliate) from (University/Institution of affiliate) who is doing

a study entitled: “………………………………………………………..............................................

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………. I will make sure the affiliate, while in Rwanda, gets research space and access to the library. Any cost related to this supervision will be covered by the affiliate.

# Names of Local supervisor Names of Line manager

**Signature Signature**

Date Date