

Application No:

Receipt No:

School of Medicine and Health Sciences

Affix Passport Size
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Application for Admission for PhD in Health Systems Management (PhD.HSM)

APPLICATION FEE: **KSH 5,000**

About the Program

The Doctor of Philosophy in Health Systems Management (PhD HSM) is designed to produce researchers and analysts capable of addressing policy issues and provide transformational and visionary leadership at the strategic level of the healthcare system. Graduates of the program should have the competencies to play leadership roles in areas related to health systems strengthening.

Admission Requirements

To be admitted to the PhD.HSM in KeMU, the applicants are required to submit a clearly written research concept paper containing: a description of the overall research theme embedded in the context of the current literature; the overall aim of the research; the research questions; a description of the proposed studies conducted to answer the research questions (including a suggestion for the methods used); a description of the setting in which the studies will be conducted; a reference list of literature; a time frame of the entire project.

The concept paper is expected to be sufficiently specific to enable the Department and the Board of Post Graduate Studies make an accurate assessment of the students' academic, research intentions and capabilities. The PhD.HSM applicants must present documentary evidence of both Bachelors' and Masters' degrees to show that he/she can and will successfully undertake rigorous doctoral work.

The PhD.HSM applicants will need to:

1. Submit completed application forms to the Board of Postgraduate Studies.
2. Submit a research concept paper.
3. Submit academic transcripts for all university degrees and courses taken duly certified. A Master's thesis may serve as evidence of research aptitude. The applicant should make arrangements for the official transcripts to be submitted to the University directly from their previous academic institutions.
4. Have scored a 3.0 GPA (on a 4.0 scale) in all their previous academic performance.
5. Submit three letters of recommendation attesting to the applicant's academic preparedness and ability to successfully undertake doctoral studies. At least two of these letters must be the applicant's academic referees.
6. Submit a curriculum vitae (which includes personal details, master degree, professional work experience, educational experience, other academic activities, current research interests).
7. Successfully complete the admission interview.
8. Attach a copy of National ID or Passport.

International Applications

Adequate command of spoken and written English is required for admission. Applicants whose native language is other than English and who do not hold a Bachelor degree or its equivalent from an institution at which English is the language of instruction must submit valid scores on English Proficiency Tests e.g. TOEFEL, ESL.



SECTION A: PERSONAL PARTICULARS

- 1. Applicant’s Name (Surname)
Middle Name First Name
- 2. Permanent / Home Address
- 3. Current Address (If different from the one above)
Telephone No: Email:
- 4. Gender: Male Female
- 5. Date of Birth
- 6. Marital Status (Single /Married
- 7. Religion Denomination
- 8. Nationality
- 9. National ID / Passport No:
- 10. How do you plan to finance your studies (tick appropriately)
 Self-sponsored Scholarship Name: (if not self)
- 11. Next of Kin
Name Relationship
- Cell Phone Email

SECTION B: PROGRAM PARTICULARS

- 12. Area of health systems strengthening concentration applied for (tick appropriately)
 Service Delivery Health Workforce Health Management Information System
 Medical Products, Vaccines & Technologies Health Financing Leadership and Governance in Health

SECTION C: PROGRAMME PARTICULARS

- 13. State your research interests and objectives. (Be specific and avoid generalization)
.....
- 14. Mode of study (Tick where applicable) Full Time Weekend intensive

SECTION D: ACADEMIC PROFILE

15. Secondary School

Institution	From	To	Certificate

16. Post Secondary School-Colleges / University

Colleges/ University	Years	Field of Study	Qualifications Obtained

17: Expected Date of Enrollment

18. State briefly why you have chosen to carry out your postgraduate studies in the selected area

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SECTION E: DECLARATION

I certify that the information given on this form herein above is correct to the best of my knowledge and belief.

Signature of the applicant Date

SECTION F: REFEREES

At least one referee must have taught the applicant at University level.

(a) Name of Referee

Designation:

Contact Address:

.....

Cell phone: Email:

(b) Name of Referee.....
Designation:
Contact Address:
.....
Cell phone: Email:

(c) Name of Referee.....
Designation:
Contact Address:
.....
Cell phone: Email:

SECTION G: FOR OFFICIAL USE ONLY

Recommendation of the Ph.D Coordinator

Accepted Deferred

Ph.D Coordinator Signature Date

Recommendation of the Board of Postgraduate Studies

Accepted Deferred

Dean's Signature Date



Meru: 0724-256162,0734-310655, Nairobi: 0725-751878,0735701311, Mombasa: 041-2495945/8, Nakuru: 051-2214456, Nyeri: 0700739988, Maua: 061-2302975/020-2691449/020-2118439, Marimanti: 0703700724, Kisii: 0711710826



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