

ACADEMIC STAFF PROFESSIONAL PROFILE FORM

1. Personal Data

Name: DR. CHRIS MWANTHI MBALUKA
Title/Qualifications: MBCHB; MMED(OBS/GYN) UNIVERSITY OF NAIROBI
Department/Unit/Section: OBSTETRICS & GYNECOLOGY
Contact Address: P.O. BOX 19651-00202 NAIROBI
Position: PART-TIME LECTURER
Area of Specialization: OBSTETRICS/GYNECOLOGY
Research Interests: INFERTILITY

2. Conference Presentations

S/No	Presenter	Title of Paper presented	City/Country	Date of Conference	Funding (US\$)

3. Research

S/ No	Researcher	Year	Title	Donor	Funding (US\$)

4. Funded projects

S/ No	Researcher	Year	Title	Granting Body	Funding (US\$)

5. Publications

S/No.	Author	Year	Title	Journal	ISBN/ISSN Reference No.

--	--	--	--	--	--

6. Consultancy and community service

S/No.	Consultant (s)	Consulting Person/ Body/ Organization	Year	Title Consultancy Service	Payment (US\$)

7. Affiliation to Professional Bodies

S/No	Name of professional body
	MEMBER KENYA MEDICAL ASSOCIATION
	MEMBER KENYA OBSTETRICAL & GYNECOLOGICAL SOCIETY

8. National and International awards and Recognitions

S/No	Name of award or Recognition	Awarding Organization/Body	Year

9. External Examination (if any)

S/No	Institution	Year

10. Supervision of postgraduate students (if any)

S/No	Name of student	Thesis title	Status of project(e.g.Fiest year etc)

11. Patents (if any)

S/No	

12. Administrative positions held to date

Please send the completed form to: webmaster@ku.ac.ke