



STAFF DEVELOPMENT AWARD FORM

A. PARTICULARS OF APPLICANT

Surname Title

First Name Marital Status

Other names Gender Male Female

Maiden Name: Staff Personnel Number

Date of 1st Appointment in Anchor University: Date of Birth :

Date of Confirmation of Appointment

Department: Faculty:

Place of Birth: State of Origin:

Local Government Area: Nationality/Citizenship:

Telephone Number(s) including code Fax (if applicable):

AUL e-mail Address: Other e-mail Address(es):

Residential Address:

Permanent Home address (including Number, Street):

Name of Next of Kin (State Relationship):

Next of Kin's Phone Number:

Next of Kin's email Address(es):

Next of Kin's Residential Address:

B. QUALIFICATIONS OBTAINED (fully certified academic records or copy of certificates must be attached)

Degree (type, subject, class)	Year of Entry (month/year)	Degree obtained (month/year)	Full-time/ Part-time	University/Institution
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C. DETAILS OF PROGRAMME FOR WHICH ADMISSION HAS BEEN OBTAINED AND SPONSORSHIP IS BEING SOUGHT (Attach a valid Admission Letter)

Title of Programme:

Area of Specialisation:

Name of University/Institution:

Department:

Faculty:

Nature of Programme (Course work only, Course Work/research, research only):

Estimated duration of the Programme

If already on the programme, state duration spent so far on the programme:

If already on the programme, state additional period required to complete the study:

If already on the programme, complete the following details on your (main) Advisor/Supervisor:

Name:

Title/Position: Department:

Faculty/School:

Postal address:

Phone and fax numbers: E-mail address:

If already on the programme, please attach copies of appropriate documents to show that you have already been formally registered for the Programme. Attach also a progress report endorsed by the Dean/Secretary of the PG School. Indicate clearly if you are to do any Course work, and for how many Semesters (months).

D. DETAILS OF RESEARCH FOR WHICH YOU WISH TO RECEIVE AUL STUDY FELLOWSHIP AWARD

1. Short descriptive title of research project:

2. PROPOSED RESEARCH APPROACH: Provide a brief, clear description of the aim, objectives, background and proposed programme of work. An additional page may be used.

E. DETAILS OF WHAT YOU ARE ASKING FOR:

1. DURATION: How many Years/Months do you need to complete your programme?

2. FINANCE: Give an estimate of how much you would need to complete the programme and attach relevant documents to justify estimate. (Note: the Fellowship may not cover all your needs):

F. DECLARATION BY APPLICANT

I certify that the information supplied in this application is correct and that, if I am awarded a Fellowship, I will abide by the Guidelines, Terms and Conditions applicable to AUL Study Fellowship Award.

1. Signature of applicant:

2. Signature of witness:

3. Full name, address and occupation of witness:

G. COMMENTS/ RECOMMENDATIONS/APPROVAL:

1. APPLICANT’S HEAD OF DEPARTMENT: Comments/Recommendations:

Full Names of HOD (please print):

Department:

Signature
With Official Stamp
Date

2. APPLICANT’S DEAN OF FACULTY: Comments/Recommendations/Justification:

Full Names of Dean (please print)

Department:

Signature
With Official Stamp
Date

3. DECLARATION BY APPROPRIATE UNIVERSITY AUTHORITY/ SELECTION COMMITTEE

This application is recommended/Not recommended for support.(Delete as appropriate)

Give reasons.

Name of Chairman (please print)

Designated authority:

Signature

Date

4. THE UNIVERSITY TAKES FULL RESPONSIBILITY FOR THE ALLOCATION OF ANY FUNDS AWARDED:

Approved/Not Approved

Name (please print):

Vice-Chancellor:

Signature

Date

