**NNAMDI AZIKIWE UNIVERSITY, AWKA**

**SCHOOL OF POSTGRADUATE STUDIES**

**APPLICATION TO TEACH POSTGRADUATE COURSES AS EXTERNAL LECTURER**

(*Where applicable*)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **Name:** | |  | | | | | | | | | |  | |  | | | |
|  | | (Surname) | | | | | | | | | | | (Other Names) | | | | | | |
|  | | **Phone Number:** | | | | |  | | | | | Email: | | |  | | | |
|  | | **Department:** | | | |  | | | | | | | | | | | | | |
|  | | **University:** | | | |  | | | | | | | | | | | | | |
|  | | **Qualifications obtained with dates:** | | | | | | | | |  | | | | | | | | |
|  | |  | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | |  | | | | | | | | | |
|  | | **Area of specialization:** | | | | | |  | | | | | | | | | | | |
|  | | **Rank:** |  | | | | | | | | | | | | | | | | |
|  | | **Evidence of Approval to Teach PG Courses in Your University:** | | | | | | | | | | | | | | | Yes 🞏 No 🞎 | | |
|  | | **ID Attached** | | | Yes 🞏 No 🞎 **Type of ID:** National ID 🞎 Driver’s License 🞎 | | | | | | | | | | | | | | |
|  | | **Most Recent CV Attached** | | | | | | | Yes 🞏 No 🞎 | | | | | | | | | | |
|  | | **Indicate at least three of your publications in journals in the last thirty six months (*Attach more sheets as appropriate*):** | | | | | | | | | | | | | | | | | |
|  | | **a.** | | | | | | | | | | | | | | | | | |
|  | | **b.** | | | | | | | | | | | | | | | | | |
|  | | **c.** | | | | | | | | | | | | | | | | | |
|  | | **d.** | | | | | | | | | | | | | | | | | |
| Signature: | | | | | | | | | | Date: | | | | | | |

**RECOMMENDATIONS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | YES | NO | Remarks | Sign | Date |
| Head of Department |  |  |  |  |  |
| Dean of Faculty |  |  |  |  |  |
| Dean, SPGS |  |  |  |  |  |

**VICE CHANCELLOR’S APPROVAL FOR PRESENTATION TO BOARD**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Approved |  | Not Approved |  | Signature: |  | Date: |  |

|  |
| --- |
|  |

**FOR OFFICE USE ONLY: SPGS**

Dean:

|  |
| --- |
| Secretary: |
| Others: |
|  |