**NNAMDI AZIKIWE UNIVERSITY, AWKA**

**COLLEGE OF POSTGRADUATE STUDIES**

**APPLICATION FOR SUPERVISION OF POSTGRADUATE RESEARCH**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Name:** |  |  |  |
|  | (Surname) | (Other Names) |
|  | **Phone Number:** |  | **Email:** |  |
|  | **Department:** |  |
|  | **Qualifications obtained with dates:** |  |
|  |  |  |
|  |  |  |
|  | **Area of specialization:** |  |
|  | **Rank:** |  |
|  | **Are you a postgraduate supervisor? No Yes Attach copies of appointment letters.** |
|  | 1. Indicate programmes supervised:
 | PGD | MASTER | PhD |
|  | 1. The number of students you have successfully supervised:
 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **NAME** | **REG. NUMBER** | **TITLE OF THESIS** | **DATE**  | **INSTITUTION** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. Attach copies of CPGS Form 036B for each candidate

|  |  |  |
| --- | --- | --- |
|  | **Indicate three of your publications in journals in the last thirty six months[[1]](#footnote-1):** |  |
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|  |  |
|  | **Do you think your health can withstand the usual rigors associated with postgraduate programme supervision? Yes No**  |
|  |  |  |
|  | **Signature** |  | **Date** |

**Recommended for Approval**

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

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

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

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| --- |
|  |

**FOR OFFICE USE ONLY: CPGS**

**Provost:**

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

1. Attach copies of the publications. [↑](#footnote-ref-1)