**NNAMDI AZIKIWE UNIVERSITY, AWKA**

**COLLEGE OF POSTGRADUATE STUDIES**

**APPLICATION FOR TUITION REBATE**

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| --- | --- |
| **Session:** |  |

**DETAILS OF STAFF**

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|  | **Nam**  **e:** |  | | | | | | | **Sex: Male Female**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 1. | NAME IN FULL (SURNAME FIRST): | | | | | |  | | | | | | | | | | | | | | | 2. | PHONE NUMBER AND EMAIL ADDRESS: | | | | | | | | | |  | | | | | | | | | | | 3. | PERMANENT HOME ADDRESS: | | | | | | |  | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | | 4. | CORRESPONDENCE ADDRESS: | | | | |  | | | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | | 5. | DATE OF BIRTH: | | |  | | | | | | | | | | | | | | | | | | 6. | AGE AS AT LAST BIRTHDAY: | | | |  | | | | | | | | | | | | | | | | | 7. | SPONSORSHIP: | | | 1. Name of Sponsor: | | | | | |  | | | | | | | | | | | |  |  | | | 1. Address of Sponsor: | | | | | | |  | | | | | | | | | | | 8. | QUALIFICATION: | | | Degree/Qualification Obtained: | | | | | | | | | | | | | | | | | |  |  | | | **University** | | | | | | | | **Degree** | | | **Course** | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | | | 1. | NAME IN FULL (SURNAME FIRST): | | | | | |  | | | | | | | | | | | | | | 2. | PHONE NUMBER AND EMAIL ADDRESS: | | | | | | | | | |  | | | | | | | | | | 3. | PERMANENT HOME ADDRESS: | | | | | | |  | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | 4. | CORRESPONDENCE ADDRESS: | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | 5. | DATE OF BIRTH: | | |  | | | | | | | | | | | | | | | | | 6. | AGE AS AT LAST BIRTHDAY: | | | |  | | | | | | | | | | | | | | | | 7. | SPONSORSHIP: | | | 1. Name of Sponsor: | | | | | |  | | | | | | | | | | |  |  | | | 1. Address of Sponsor: | | | | | | |  | | | | | | | | | | 8. | QUALIFICATION: | | | Degree/Qualification Obtained: | | | | | | | | | | | | | | | | |  |  | | | **University** | | | | | | | | **Degree** | | | **Course** | | **Class of Certificate** | | **Date** | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 1. | NAME IN FULL (SURNAME FIRST): | | | | | |  | | | | | | | | | | | | | | | 2. | PHONE NUMBER AND EMAIL ADDRESS: | | | | | | | | | |  | | | | | | | | | | | 3. | PERMANENT HOME ADDRESS: | | | | | | |  | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | | 4. | CORRESPONDENCE ADDRESS: | | | | |  | | | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | | 5. | DATE OF BIRTH: | | |  | | | | | | | | | | | | | | | | | | 6. | AGE AS AT LAST BIRTHDAY: | | | |  | | | | | | | | | | | | | | | | | 7. | SPONSORSHIP: | | | 1. Name of Sponsor: | | | | | |  | | | | | | | | | | | |  |  | | | 1. Address of Sponsor: | | | | | | |  | | | | | | | | | | | 8. | QUALIFICATION: | | | Degree/Qualification Obtained: | | | | | | | | | | | | | | | | | |  |  | | | **University** | | | | | | | | **Degree** | | | **Course** | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | | | 1. | NAME IN FULL (SURNAME FIRST): | | | | | |  | | | | | | | | | | | | | | 2. | PHONE NUMBER AND EMAIL ADDRESS: | | | | | | | | | |  | | | | | | | | | | 3. | PERMANENT HOME ADDRESS: | | | | | | |  | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | 4. | CORRESPONDENCE ADDRESS: | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | 5. | DATE OF BIRTH: | | |  | | | | | | | | | | | | | | | | | 6. | AGE AS AT LAST BIRTHDAY: | | | |  | | | | | | | | | | | | | | | | 7. | SPONSORSHIP: | | | 1. Name of Sponsor: | | | | | |  | | | | | | | | | | |  |  | | | 1. Address of Sponsor: | | | | | | |  | | | | | | | | | | 8. | QUALIFICATION: | | | Degree/Qualification Obtained: | | | | | | | | | | | | | | | | |  |  | | | **University** | | | | | | | | **Degree** | | | **Course** | | **Class of Certificate** | | **Date** | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | | |
|  | (Surname) | | | | | | (Other Names) | | | |
|  | **Department:\_\_\_\_\_\_\_\_\_\_\_\_\_**  **3. Staff Number:** | |  | | **Faculty:\_\_\_\_**  **Phone No:** | | | | **Email:** | |
| 4 | **Degree in View:** | | | PGD | | | | Masters | | PhD |
| 5 | **Area of Specialization:** | |  | | | | | | | |
| 6 | **Title of Thesis/Dissertation:** | | |  | | | | | | |
|  |  | | | | | | | | | |
|  |  | | | | | | | | | |
| 7 | **Date of First Registration:** | |  | | | | | | | |
| 8 | **Number of Semesters already completed:** | | | | |  | | | | |

**RECOMMENDATION**

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

**APPROVAL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Provost, CPGS |  |  |  |  |  |

**FOR OFFICE USE ONLY: SECRETARY CPGS**