

CONFIDENTIAL

UNIVERSITY FOR DEVELOPMENT STUDIES

This form is to be completed (10 copies) and returned to the Registrar, University for Development Studies, P.O. Box 1350, Tamale, Ghana or to the Senior Assistant Registrar, Universities of Ghana Office, 321 City Road, London, EC IV ILJ, U.K.

APPLICATION FOR APPOINTMENT AS.....

(State clearly the post for which applicant is being made)

IN THE DEPARTMENT/INSTITUTE/SCHOOL OF.....

1. PERSONAL PARTICULARS:

a) Surname: (Mr./Mrs./Miss/Dr./Prof. etc.).....

(BLOCK LETTERS)

b) First & Other Names.....

c) Present Address in full.....

d) Telephone No.....

e) Nationality:

i. Nationality at birth (if different).....

ii. Surname at birth (if different).....

iii. If naturalized citizen, give number and date of certificate.....

..... and name in which it was granted.....

iv. Aliens Registration Number.....

f) Date of Birth.....

g) Place of Birth

h) Whether single, married or widow/widower.....

i) Full name and nationality at birth of:

- i. Father.....
Nationality.....
- ii. Mother (Maiden name).....
Nationality.....
- iii. Husband or wife (maiden name)
Nationality.....

j) **Children**

Name	Date of Birth

2. EDUCATION

a) Where educated

Secondary School/College/University	From	To

b) Qualifications (Degrees, certificates, diplomas, with classes, distinctions, etc.) and membership/fellowship of professional bodies, giving the dates on which each was obtained: *(photocopies of certificates should be attached)*

3. PRESENT APPOINTMENT

Name of institution/organization.....

Position indicating dates.....

i.

ii.

iii.

Date of appointment.....

Details of emoluments

i. Basic salary.....

ii. Allowances.....

iii. Others.....

4. WORKING EXPERIENCE

INSTITUTION/ORGANIZATION	DATES	POSITION HELD AND RESPONSIBILITIES

5. Details of major administrative/professional projects undertaken, including reports, memoranda and publication with dates.

6. A brief statement on areas of special administrative/professional interest

7. Name and Address of three Referees (At least two of them should be able to report on your Administrative/Professional competence. Names of relatives must not be given)

i.

ii.

iii.

.....

Candidates are advised to request referees to respond promptly to enquiries when made

8. GENERAL

i. Names of learned or professional associations of which the candidate is a member.....

ii. Extra-curricular activities in which the candidate is interested

9. This space below may be used by the applicant for any additional details he may wish to give.

I certify that all the information given on this form is correct. I understand that concealment of any fact or declaration of any intentional false statement(s) will be considered sufficient grounds for non-employment or for subsequent dismissal.

Signature of Applicant..... Date.....