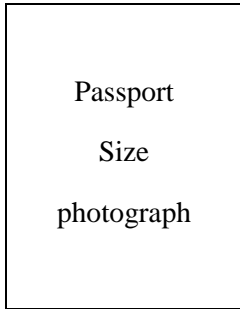


UNIVERSITY FOR DEVELOPMENT STUDIES



*This form is to be completed and returned seven copies to the Registrar,
University for Development Studies, P.O. Box 1350, Tamale*

Application for appointment as:.....

(State clearly the post which application is being made)

In the department/Organization:.....

1. PERSONAL PARTICULARS

a) Surname (Mr./Mrs./Miss):.....

(BLOCK LETTERS)

b) First Name:.....

c) Maiden Name (of female applicant if married).....

d) Present address in full:.....

e) Telephone No.:.....

f) Date and place of Birth:.....

g) Nationality:.....

h) Hometown:.....

i) Are you single or married?.....

j) Number of children (if any).....

2. EDUCATION AND TRAINING

a) Where Educated

Primary/Secondary/College/University	Date	
	From	To

3. QUALIFICATION, etc (give the dates on which each was obtained)

.....
.....
.....

4. PREVIOUS EMPLOYMENT

Date		Name and Address of Employer	Position Held	Salary
From	To			

5. PRESENT EMPLOYMENT

Date employed:.....

Name of employer:.....

Address of employer:.....

Position held:.....

Salary:.....

6. NAMES AND ADDRESSES OF TWO REFEREES

i.

ii.

The space below may be used for any additional information you wish to give

.....
.....

I certify that the information given on this form is correct

Date:.....

Signature:.....