**UNIVERSITY OF GHANA**



**OFFICE OF RESEARCH, INNOVATION AND DEVELOPMENT**

**APPLICATION FORM FOR VISITING RESEARCH STUDENTS**

**PLEASE TAKE NOTE THAT YOU MUST APPLY AT LEAST ONE MONTH BEFORE YOUR INTENDED**

**DATE OF ARRIVAL AT THE UNIVERSITY OF GHANA**

Before you submit this form, please check that you have attached the following:

1. ***Certified Copies of certificates***
2. ***Full CV***
3. ***One passport picture uploaded unto this form***
4. ***Letter of Recommendation from Parent Institution***
5. ***Letter of Acceptance from Host Department/ Unit***
6. ***Evidence of Funds for intended stay and research in Ghana (e.g. award letter for grant etc)***
7. ***Research Summary of not more than 3 pages, single spacing, Times New Romans 12 Font; also attach a 1 page budget for your stay and research in Ghana as well as a workplan***

**1. Personal Details:**

SURNAME

FIRST AND OTHER NAMES

ADDRESS FOR CORRESPONDENCE

EMAIL ADDRESS

SEX

DATE OF BIRTH *(day/ month / year)*

TITLE

NATIONALITY/ COUNTRY

TELEPHONE NUMBER (HOME/ CELL)

FAX NUMBER

PERMANENT HOME ADDRESS

**2. Previous Education:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Colleges/ Universities Attended** | **Dates**  ***(i.e. from xxx –to xxx)*** | **Degree(s) obtained** | **Class/ Division** |
|  |  |  |  |
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|  |  |  |  |

**3. Past/ Present Employment:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Employer** | **Dates**  ***(i.e. from xxx –to xxx)*** | **Position** | **Main responsibilities** |
|  |  |  |  |
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|  |  |  |  |

**4. Affiliation Details**

**a. Department/ Unit to which affiliation is sought**………………………………………………………………

**b. Intended duration of research in Ghana *(please provide dates i.e. day/ month/ year)***

From----------------------------------------------------- To -------------------------------------------------

**c. Details of Research project to be undertaken**

***(Attach as a separate document, a Research Summary of not more than 3 pages, single spacing, Times New Romans 12 Font; also attach a 1 page budget for your stay and research in Ghana as well as a workplan)***

**5. Sponsorship Information**

|  |  |  |
| --- | --- | --- |
| **Name of Sponsor(s)** | **Grant/ Sponsorship Amount** | **Expiry date of Award** |
|  |  |  |
|  |  |  |
|  |  |  |

**6. Signature of Applicant**

DATE (Day/ Month/ Year)

SIGNATURE

**7. Endorsement by Head of Department in Parent Institution**

FULL NAME (INCLUDING TITLE)

POSITION

DATE (Day/ Month/ Year)

SIGNATURE AND SEAL

|  |  |  |
| --- | --- | --- |
| **8. Cost of Affiliation** | | |
| **Duration** | **Fees** | **Currency** |
| **≤ 3 months** | **990** | **USD** |
| **4 – 6 months** | **1,352** | **USD** |
| **≥ 6 months** | **2,395** | **USD** |

9. Application Checklist

*Please check the appropriate box to indicate the additional documentation attached to this application*

Certified Copies of certificates  Full CV

Clearly scanned copy of passport bio-page  Letter of Recommendation from Parent Institution

Letter of Acceptance from Host Department/ Unit  Evidence of Funds for intended stay and research

Research Summary of not more than 3 pages

***For Official Use Only***

**Date Received: Application Number:**

**Date Processed: Decision: Date:**

**PLEASE COMPLETE THIS FORM AND RETURN BY EMAIL TO THE OFFICE OF RESEARCH, INNOVATION AND DEVELOPMENT (ORID)**

**AT** [**orid-researchadmin@ug.edu.gh**](mailto:orid-researchadmin@ug.edu.gh)