CODE:ARJ/DESS/CPI/14.6/11

**TETFUND/INSTITUTIONS-BASED ACADEMIC/RESEARCH JOURNAL (A/RJ) PUBLICATIONS DEVELOPMENT INTERVENTION COST /PROJECTS ITEMS-A GUIDE**

The following projects items can be used by beneficiary institutions to guide costing/cost-breakdown with respect to TETFUND A/R J Publication Intervention:

1. Manuscript development which includes the following:
2. Advert & call for papers/manuscripts.
3. Preparation of manuscripts and other Editorial activities including establishment of the Journals secretariat, collection and collation of manuscripts from the beneficiary institutions authors, manuscripts from other institution/writers etc.
4. Critiquing of the manuscripts via peer review mechanism/activities to ensure cross validation, minimise ‘Halo effect’ and the selection of best and suitable manuscripts for publication.
5. Post peer- review consideration meetings by the institutions Editorial Board Committee.
6. Production of the journal publications being developed with the selected peer-reviewed manuscripts, including printing, mass production of the journals and indicating the quantities, (i.e copies to be mass produced), unit cost for the copies and justification for the budget.
7. E-publishing/hosting in the Beneficiary institutions journal website and /or other international/national institution’s journal sites.
8. Scanning and uploading of ‘Back issues’
9. The Journal website development and maintenance.
10. Marketing and distribution of the Journals developed to relevant stakeholders/contributors.
11. Abstracting and indexing
12. Report writing on the entire process of the Beneficiary institution’s development of its TETFUND sponsored Journal publication.
13. Contingency/miscellaneous activities or items.

Annexture 1

Form TETFUND/ESS.D/A.IBA/RA/5.10/B

**Note:** To be duly filled, signed by all officers of the institution indicated and forwarded to TETFund along with every beneficiary’s Institution-Based Research & Development Submission/Proposal (i.e Request) for Approval-in-Principle (AIP) as part of critical Documentation for Accessing TETFund Annual R & D Intervention Allocation/Fund.

**Note:** Completed and Signed version of this Template is “a must return to TETFund” without which the submission/Proposal of the defaulting Institution will not be vetted/processed.

**INSTRUCTION FOR COMPLETION OF THIS TEMPLATE**

Section A, B, C, to be completed, singed and dated appropriately by Head Researcher (for Group/Team Research)/Researcher (in the case of Individual Research)

Section D: To be completed signed and stamped by the appropriate Officers of the Institution indicated

1. Documentation of particulars of beneficiary institution(s) and the Research Proposal(s)/Submission(s)
2. Name of Beneficiary Institution:..........................................................................
3. Year(s) of Intervention being Accessed/Processed:..............................................
4. Date of Submission/Proposal from Beneficiary Institution:................................
5. Reference Number of the Submission/Proposal from Beneficiary Institution:...............................................................................................................
6. Title/Subject of the Research Submission/Proposal:................................................

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

1. Total Amount being requested/required by the Institution: N.................................
2. Amount of Annual TETFUND Research Allocation for the Institution for the intervention under Processing: N.............................................................................
3. Amount of Outstanding Research Allocation of the Institution (if any):N...............

 N...............

1. Amount of Last Disbursement (if any): N.................................................................
2. Date of Last Disbursement (if applicable): N...........................................................

B. Type of Institution Based Research Proposal(s) being submitted and Amounts Requested.

 xi) B1: Research Studies/Project Proposals: (Tick as Appropriate) Yes [ ] B1 [ ] No

1. B2: Research Capacity Building and Training including Train-the-Trainers

 (Tick as appropriate) Yes [ ] B2 [ ] No

1. B3: Research Infrastructural Facilities Development and Equipment Procurement (Tick as appropriate) Yes [ ] B3 [ ] No
2. B4: Group/Team Research Yes [ ] B4 [ ] No
3. B5: Individual Research Yes [ ] B5 [ ] No

C. Details about the Research including summary of cost and list of Researcher(s)

 xvi. Research Topic: ......................................................................................................

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

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

 xvii Duration of Implementation:..................................................................... (in Months) (State commencement and completion Dates)

 xviii) List expected benefits of the Research (Use additional Sheet if need be):....................

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

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

 xix) Summary of Research cost implication/breakdown

1. ...........................................................................
2. ...........................................................................
3. ...........................................................................

Total = N....................................

xx) Name and particulars of Lead Researcher: (Attach the cost/particulars of all Researchers involved in the Research) with this Form/Template

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

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

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

 ................................................. Signature of Lead Researcher with Date

 D Approval/Non Approval (To be completed by the Approving Authorities)

 Approved? (Tick in the box as appropriate) Yes [ ] No [ ]

 xxi) Name and particulars of Chairman Institution’s Committee on Research (i.e ICR)

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

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

 xxii) .......................................................... Signature of Chairman, ICR with Date & Stamp

 xxiii) Name and Particulars of Director of Academic Planning

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xxiv) ........................................................ Signature of Director of Academic Planning with date & stamp

ANNEXTURE 4: FORM TETFUND/DESS/ASW/P.CON/F.10

**TETFUND STAKEHOLDERS STRATEGIC WORKSHOP PARTICIPANT’S/BENEFICIARY INSTITUTION’S INPUT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S/N** | **TETFUND ACADEMIC/EDUCATION RELATED INTERVENTION PROGRAMMES** | **Q1 = OUTLINE HOW PROCESSING OF YOUR SUBMISSION/PROPOSALS FOR UTILIZATION OF INTERVENTION FUNDS IN TETFUND ACADEMIC/EDUCATION INTERVENTION PROGRAMMES SHOULD BE FACILITATED** | **Q2 = LIST RECOMMENDATIONS AND OUTLINE ASSOCIATED STRATEGIES TO ENSURE EFFECTIVE DELIVERY OF THE UNDERLISTED TETFUND ACADEMIC/EDUCATION-BASED INTERVENTION PROGRAMMES INCLUDING SUGGESTIONS WITH RESPECT TO MODE OF A.I.P, PROCESSING OF DISBURSEMENTS, MONITORING & EVALUATION AND COMMUNICATION BETWEEEN BENEFICIARY INSTITUTIONS AND TETFUND** | **OTHER REMARKS** |
| **RESPONSE** | **RESPONSE** |
| **RECOMMENDATIONS** | **STRATEGIES** | **RECOMMENDATIONS** | **STRATEGIES** |
| A | Research & Development (R & D) Intervention  |  |  |  |  |  |

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Name of Participant & Official Institution of the Participants Signature of Participants & Date

 Designation Phone No. Representing

ANNEXTURE 4: FORM TETFUND/DESS/ASW/P.CON/F.10

**TETFUND STAKEHOLDERS STRATEGIC WORKSHOP PARTICIPANT’S/BENEFICIARY INSTITUTION’S INPUT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S/N** | **TETFUND ACADEMIC/EDUCATION RELATED INTERVENTION PROGRAMMES** | **Q1 = OUTLINE HOW PROCESSING OF YOUR SUBMISSION/PROPOSALS FOR UTILIZATION OF INTERVENTION FUNDS IN TETFUND ACADEMIC/EDUCATION INTERVENTION PROGRAMMES SHOULD BE FACILITATED** | **Q2 = LIST RECOMMENDATIONS AND OUTLINE ASSOCIATED STRATEGIES TO ENSURE EFFECTIVE DELIVERY OF THE UNDERSLISTED TETFUND ACADEMIC/EDUCATION-BASED INTERVENTION PROGRAMMES INCLUDING SUGGESTIONS WITH RESPECT TO MODE OF A.I.P, PROCESSING OF DISBURSEMENTS, MONITORING & EVALUATION AND COMMUNICATION BETWEEEN BENEFICIARY INSTITUTIONS AND TETFUND** | **OTHER REMARKS** |
| **RESPONSE** | **RESPONSE** |
| **RECOMMENDATIONS** | **STRATEGIES** | **RECOMMENDATIONS** | **STRATEGIES** |
| A | Academic/ResearchJournals Publication(A/RJP) Intervention |  |  |  |  |  |

**Use Additional Sheet**

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Name of Participant & Official Institution of the Participants Signature of Participants & Date

 Designation Phone No. Representing

ANNEXTURE 4: FORM TETFUND/DESS/ASW/P.CON/F.10

**TETFUND STAKEHOLDERS STRATEGIC WORKSHOP PARTICIPANT’S/BENEFICIARY INSTITUTION’S INPUT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S/N** | **TETFUND ACADEMIC/EDUCATION RELATED INTERVENTION PROGRAMMES** | **Q1 = OUTLINE HOW PROCESSING OF YOUR SUBMISSION/PROPOSALS FOR UTILIZATION OF INTERVENTION FUNDS IN TETFUND ACADEMIC/EDUCATION INTERVENTION PROGRAMMES SHOULD BE FACILITATED** | **Q2 = LIST RECOMMENDATIONS AND OUTLINE ASSOCIATED STRATEGIES TO ENSURE EFFECTIVE DELIVERY OF THE UNDERSLISTED TETFUND ACADEMIC/EDUCATION-BASED INTERVENTION PROGRAMMES INCLUDING SUGGESTIONS WITH RESPECT TO MODE OF A.I.P, PROCESSING OF DISBURSEMENTS, MONITORING & EVALUATION AND COMMUNICATION BETWEEEN BENEFICIARY INSTITUTIONS AND TETFUND** | **OTHER REMARKS** |
| **RESPONSE** | **RESPONSE** |
| **RECOMMENDATIONS** | **STRATEGIES** | **RECOMMENDATIONS** | **STRATEGIES** |
| C | Academic Staff Training & Development (AST & D) Intervention  |  |  |  |  |  |

**Use Additional Sheet**

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Name of Participant & Official Institution of the Participants Signature of Participants & Date

 Designation Phone No. Representing

ANNEXTURE 4: FORM TETFUND/DESS/ASW/P.CON/F.10

**TETFUND STAKEHOLDERS STRATEGIC WORKSHOP PARTICIPANT’S/BENEFICIARY INSTITUTION’S INPUT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
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| **RESPONSE** | **RESPONSE** |
| **RECOMMENDATIONS** | **STRATEGIES** | **RECOMMENDATIONS** | **STRATEGIES** |
| D | Library Development (Lib Dev) Intervention  |  |  |  |  |  |

**Use Additional Sheet**

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Name of Participant & Official Institution of the Participants Signature of Participants & Date

 Designation Phone No. Representing