



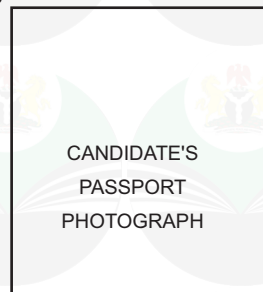
tetfund

TERTIARY EDUCATION TRUST FUND

TETFund CONFERENCE ATTENDANCE NOMINATION FORM

(To be completed by Candidate and Beneficiary Institution)

- i. Name of Beneficiary Institution:
- ii. Name of Candidate/Staff:
- iii. Gender: Male Female
- iv. Date of Birth:
- v. Present Position (For Principal Officers):.....
- vi. Staff Category: Teaching Staff Non Teaching Staff
- vii. Phone Number/ Signature:.....



S/N	CANDIDATE'S DATA/INSTITUTIONAL RECORD	
1.	Department	
2.	Qualification	Highest Qualification..... Area of Specialisation.....
3.	Rank	
4.	Grade Level	
5.	Date of 1 st Appointment	
6.	Duration of Entire Work Experience	
7.	Number of Years Spent in the Institution	
8.	Conference to be Attended	Conference Details: a) Conference Organiser(s) :..... b) Title & Venue:..... c) Registration Fee:..... d) Date:..... Duration:.....
9.	Conference Attendance History	Last International Conference Attended (Sponsored by TETFund): a) Title:..... b) Date:..... Venue:..... c) Publication from the conference presentation (as cited) :.....
10.	Candidate's Salary Account Details	a) Bank Name & Branch:..... b) Account Name:..... c) Account Number:..... d) Sort Code:.....

.....
Name & Signature of Vice Chancellor/Rector/Provost
 (Including Stamp)

.....
Name & Signature of Director Academic Planning/DVC
 (Academics)(Including Stamp)

Note: Any form that is not properly filled will be automatically disqualified