LAGOS STATE UNIVERSITY, OJO

Staff Welfare Unit

NON-TEACHING

APPLICATION FORM FOR GRANTS FROM THE TRAINING & DEVELOPMENT VOTE

To: The Vice Chancellor Thru: The Registrar Thru: Head of Department

I wish to apply for Sponsorship by the University from the Training and Development Vote to attend a Conference/Workshop/Seminar/Course the particulars of which are as Stated below:

Documents relevant to the Programme are herewith attached please.

SE	CTION A			
1.	NAME:		PF:	
2.	DESIGNA	ATION:	PHONE NUMBI	ER:
3.	SALARY	GRADE/LEV	EL:	
4.	DEPART	MENT/DIVIS	SION:	
5.			TION (ABUJA/WESTERN STATE/EASTER	
		Applicable)		
6.			ICE/COURSE/WORKSHOP/SEMINAR	
7.			NCE:	
8.	PERIOD C	OF CONFERE	ENCE:	
9.	CONFERE	ENCE LAST A	ATTENDED UNDER UNIVERSITY SPONS	ORSHIP
	(i)	Title:		
	(ii)	Venue:		
	(iii)	Period:		
	Amoun	t granted (i	ncluding air fare)	
		ınature		Date
SE	CTION B			
10		OMMENDAT	TION OF HEAD OF UNIT/DEPARTME	NT/DIVISION ON THE

		ignature		 Date

SECTION C

/:\	Course for (no advanticad)		
(i) (ii)	Course fee (as advertised) Course Location (Hotel Expenses, feeding et	tc)	
()	(a) Abuja trip ()	
	(b) Western State trip ()	
	(c) Northern and Eastern State trip ()	
(iii)	Incidental/Contingency		
	Local Transportation		
	(a) Staff Salary		
	(b) Course Location		
v) 1 (
v) To	otal Amount Recommended:		
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