#### UNIVERSITY OF IBADAN POSTGRADUATE COLLEGE

#### CLAIMS FORM FOR INTERNAL EXAMINERS FOR HIGHER DEGREE EXAMINATION

(Make copies equivalent to the serial no.)

The underlisted Academic Staff had taken part in an (Academic Master) Examination

Total number of Candidates:	Department:
Date of Examination:	Session of Examination:

S/ NO.	PFNO.	NAME	DESIGNATION	DEPARTMENT	AMOUNT DUE (NAIRA)	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE
1			Chairman/H.O.D		₩10,000.00				
2			Internal		₩10,000.00				
3			Supervisor		N10,000.00				
4			Supervisor		₩10,000.00				
5			Supervisor		₩10,000.00				
6			Supervisor		₩10,000.00				
7			Supervisor		₩10,000.00				
8			Supervisor		₩10,000.00				
9			PG-Coordinator		₩5,000.00				

Provost, Postgraduate College

Head of Department (OFFICIAL STAMP)

Note:

- (1) Kindly use extra sheet if numbers of examiners exceed the ten indicated above.
- (2) Also note that honorarium payable for Masters Oral Examination is ₹10, 000.00 flat rate, irrespective of number of candidates or number of examinations conducted.

### UNIVERSITY OF IBADAN POSTGRADUATE COLLEGE

### CLAIMS FORM FOR INTERNAL EXAMINERS FOR HIGHER DEGREE EXAMINATION

(Fill in triplicate)

The underlisted Academic Staff had taken part in an M.Phil/Ph.D. Conversion Examination.

lame of Candidate	•	•••••	Department:						
Matric No.:	······································		Date of Examinations:						
ession of Examination	n:								
			=						
NAME	DESIGNATION	DEPARTMENT	AMOUNT DUE (NAIRA)	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE		
	Internal/ External		N20, 000.00						
					Н	lead of Departm	ent		
	Matric No.:	Matric No.:ession of Examination:  NAME DESIGNATION  Internal/	NAME DESIGNATION DEPARTMENT  Internal/ External	Matric No.:         Date           ession of Examination:         =           NAME         DESIGNATION         DEPARTMENT         AMOUNT DUE (NAIRA)           Internal/ External         N20, 000.00	Matric No.: Date of Examination:   The session of Examination:  The session of Examination of Examinatio	Matric No.:	Matric No.: Date of Examinations:  Session of Examination:  Session of Examination:  Session of Examination:  Session of Examinations:  Session of E		

# UNIVERSITY OF IBADAN POSTGRADUATE COLLEGE

## CLAIMS FORM FOR INTERNAL EXAMINERS FOR HIGHER DEGREE EXAMINATION

(Make copies equivalent to the serial no.)

The underlisted Academic Staff had taken part in an Ph.D/MD Examination.

Provost, Postgraduate College

		didate		-	nt						
	Matric. No.:			Date of Examination							
	Session of Exar	mination:									
'NO.	PF No	NAME	DESIGNATIO N	DEPARTMENT	AMOUNT DUE (NAIRA)	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE		
1			Chairman/ Supervisor		N20,000.00		110				
2			Internal/ Supervisor		₩20,000.00						
3			Co-Supervisor		₩20,000.00						
4			Internal/ External		₩25,000.00						
5			Sub-Dean (PG)		₩10,000.00						
6			Provost/Rep		N10,000.00						
7			PG-Coordinator		N10,000.00						

Head of Department (OFFICIAL STAMP)

# UNIVERSITY OF IBADAN POSTGRADUATE COLLEGE

## CLAIMS FORM FOR INTERNAL EXAMINERS FOR HIGHER DEGREE EXAMINATION

(Make copies equivalent to the serial no.)

Name of Candidate			•			Session of Examination:				
′NO.	PF NO	NAME	DESIGNATION Chairman/ Supervisor	DEPARTMENT	AMOUNT DUE (NAIRA) ¥20,000.00	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE	
2			Internal/ Supervisor		₩20,000.00					
3			Co-Supervisor		№20,000.00					
4			Internal/ External		¥25,000.00					
5			Sub-Dean (PG)		¥10,000.00					
6			Provost/Rep		₩10,000.00					
7			PG-Coordinator		№10,000.00					
		tgraduate College				Head o	f Departme			