

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:..... Indicate the Degree: M. A/M. Sc./M. Ed. Etc

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.

Name of Candidate:.....

Department:.....

Matric No.:.....

Date of Examinations:.....

Session of Examination:-----

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S/NO.	NAME	DESIGNATION	DEPARTMENT	AMOUNT DUE (NAIRA)	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE
1		Internal/ External		N20, 000.00				

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

Name of Candidate..... Department.....

Matric. No.:..... Date of Examination.....

Session of Examination:-----

S/NO.	PF No	NAME	DESIGNATIO N	DEPARTMENT	AMOUNT DUE (NAIRA)	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE
1			Chairman/ Supervisor		₦20,000.00				
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				

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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 M.Phil Examination.

Name of Candidate..... Department.....

Matric. No.:..... Date of Examination..... Session of Examination:-----

S/NO.	PF NO	NAME	DESIGNATION	DEPARTMENT	AMOUNT DUE (NAIRA)	TEL. NO.	ACCOUNT NO	BANK NAME	SIGNATURE
1			Chairman/ Supervisor		₦20,000.00				
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				

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