**Application for Study Leave for Postgraduate Studies**

**(Academic/Administrative) Staff**

1. **Personal Details**

|  |  |  |
| --- | --- | --- |
| * 1. Name with initials | : | Click here to enter text. |
| 1.2 Permanent Address | : | Click here to enter text. |
| * 1. Date of Birth | : | Click here to enter text. |
| * 1. Designation | : | Click here to enter text. |
| * 1. Department/Division | : | Click here to enter text. |
| * 1. Faculty | : | Click here to enter text. |
| * 1. Date of Duty Assumption | : | Click here to enter text. |
| 1.8 Number of years of Service | : | Click here to enter text. |
| 1.9 Whether Confirmed in the Post | : | Yes  No |

1. **Scholarship Details:** *(Supporting documents should be attached)*

|  |  |  |
| --- | --- | --- |
| 2.1 Leave category | : | Full Pay  No – Pay |
| 2.2 Title of Leave | : | PG. Dip ☐ Masters ☐  M. Phil ☐ PhD ☐ |
| 2.3 Period of Leave (Full Pay)  (No-Pay) | : | From       To  From       To |
| 2.4 Source of funds | : | Government of SL  Direct Award  Privet Funds  Through a Project  Other ……………. |
| 2.5 Nature of the Award | : | Scholarship  Teaching Assistantship  Training  Other ……………. |
| 2.6 Name of the scholarship awarding authority (if any) | : | Click here to enter text. |
| 2.7 Name of the host University | : | Click here to enter text. |
| 2.8 Country of Study | : | Click here to enter text. |
| 2.9 Field of Study | : | Click here to enter text. |
| 2.10 Is this a relevant field for next promotion? | : | Click here to enter text. |
| 2.11 Value of Scholarship | : | Click here to enter text. |
| 2.12 Date of Departure | : | Click here to enter text. |
| 2.13 Date of commencement of the Study Program | : | Click here to enter text. |
| 2.14 Acting arrangement made relevant to the proposed study leave | : | Click here to enter text. |
|  |  |  |
| **Declaration of the Applicant** | | |
| I the undersigned certify that the details provided in this form are accurate. | | |
| ……………………….  Date |  | ……………………..…….  Signature of the Applicant |
| ……………………….  Date |  | ……………………..…….  Recommendation of the Head of the Department |
| ……………………….  Date |  | ……………………..…….  Recommendation of the Dean/the Registrar |

**3. Nomination of Sureties**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No** | **Name** | **University staff or not** | **Profession/ Designation** | **Whether signed as Surety before (for how many)** | **Whether under obligatory period** |
| I. |  |  |  |  |  |
| II. |  |  |  |  |  |
| III. |  |  |  |  |  |
| IV. |  |  |  |  |  |
| V. | Other Forms Bond (eg. Bank Guarantee, Mortgage Bond, etc) …………………………………………………………………………………………. | | | | |
| VI. |

**4. Other Obligations (if any)**

4.1 Other Details

Have you ever signed as a surety before? .......................................................

(For University employees only)

* If so Power of Attorney should be executed prior to leaving

4.2 Any dues form **Finance Department**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Loan** | **Date of grant** | **Amount** | **Period of loan** | **Outstanding balance as at.………………** |
| UPF Loan |  |  |  |  |
| Distress Loan |  |  |  |  |
| Other Loan (I).…………… |  |  |  |  |
| Other Loan (II) ……………… |  |  |  |  |
| **Mode of payment (when on no pay study leave) ………………………………………………………** | | | | |

………………………… ………………………………..

Date Head/Salaries & Loans Division

|  |
| --- |
| 4.3 Any dues from **Library**  I. Yes …………………………………………….  II. No  ……………………… ………………………….  Date Librarian |
| 4.4 Any dues from **General Administration**  I. Yes  ………………………………………………….  II. No  ……………………… ………………………………..  Date Head/ General Administration |

**Declaration of the Applicant**

I the undersigned certify that the details provided in this form are accurate.

………………………….. ……………………………

Date Signature of the Applicant