UNIVERSITY OF GHANA

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**OFFICE OF RESEARCH, INNOVATION AND DEVELOPMENT (ORID)**

RESEARCH SUPPORT REQUEST FORM

**PLEASE ALLOW AT LEAST 5 WORKING/ BUSINESS DAYS FROM THE DATE IT ARRIVES AT ORID FOR PROCESSING AND FEEDBACK**

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| **SUPPORT REQUESTED** | **PLEASE TICK AS APPROPRIATE** | **DOCUMENTS REQUIRED** |
| Letter of endorsement/ support to apply for research grants outside of UG or to  apply for a Fellowship |  | *Completed grant application form and/or proposal; budget; completed and endorsed request form; Indication from the HoD/ Faculty Dean how the grant will benefit the applicant, department and the faculty as a whole; Format for letter of support (if provided by funder/ donor)* |
| Signature of approved/ authorized institutional head for research contracts, consultancies etc |  | *Approved proposal, budget, electronic copy of contract agreement to be signed sent to* [*orid-researchadmin@ug.edu.gh*](mailto:orid-researchadmin@ug.edu.gh) *through the Research Development Officer* |

**PROCEDURE FOR REQUESTING SUPPORT FOR ANY OF THE ABOVE:**

1. Complete and return this form with the endorsement of your Head of Department to the Research Development Officer assigned to your faculty with the relevant supporting documents.
2. Research Development Officer ensures all the relevant documents are attached and forwards it to the Faculty Dean for appropriate endorsements/ comments.
3. Research Development Officer forwards original copies of request form and supporting documents to ORID for decision and action.

APPLICANT DETAILS:

|  |  |  |
| --- | --- | --- |
| NAME: | | |
| DEPARTMENT: | GRADE *(I.E., LECTURER, RESEARCH FELLOW ETC):* | |
| EMAIL ADDRESS(ES): | | CELL PHONE NO: |
| TITLE OF PROPOSAL ***(PLEASE ATTACH COPY OF PROPOSAL)****:* | | |

|  |
| --- |
| FUNDER/ DONOR/ SPONSOR: |
| DEADLINE FOR SUBMISSION OF DOCUMENT(S) REQUIRED: |
| ADDRESS FOR LETTER OF SUPPORT/ ENDORSEMENT |

**SIGNATURE**

|  |  |
| --- | --- |
| SIGNATURE OF APPLICANT: | DATE: |

**ENDORSEMENT BY HEAD OF DEPARTMENT**

I confirm that the School/ Institute/ Centre/ Department of……………………………………………………………………….

is in full support of the project described in the attached proposal.

Please attach on a separate sheet, any additional comments that supports this request

|  |  |
| --- | --- |
| NAME OF HOD: | |
| SIGNATURE AND DEPARTMENTAL STAMP: | DATE: |

**THIS FORM AND ALL ORIGINAL COPIES OF THE RELEVANT SUPPORTING DOCUMENTS MUST NOW BE FORWARDED TO THE RESEARCH DEVELOPMENT OFFICER ASSIGNED TO YOUR FACULTY FOR THE NEXT STEPS AND OFFICIAL SUBMISSION TO ORID**

|  |
| --- |
| DATE RECEIVED BY RESEARCH DEVELOPMENT OFFICER: |
| SIGNATURE OF RESEARCH DEVELOPMENT OFFICER CERTIFYING THAT THE DOCUMENT HAS BEEN CHECKED AND THAT ALL ORIGINAL SUPPORTING DOCUMENTS REQUIRED ARE ATTACHED: |

ENDORSEMENT BY FACULTY DEAN

I confirm that the Faculty of…………………………………………………………………………………………....

has no objection to the request for support from the above-named faculty member. We are confident that the focus of the research described in the attached proposal falls in line with the faculty’s research priorities.

|  |  |
| --- | --- |
| NAME OF FACULTY DEAN: | |
| SIGNATURE AND STAMP: | DATE: |

FOR OFFICIAL USE ONLY

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| --- |
| Date of Receipt at ORID: |

|  |
| --- |
| Decision: |

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| --- |
| Feedback due to applicant by: |