



BAUCHI STATE UNIVERSITY GADAU, NIGERIA

ACADEMIC STATUS/DATA FORM (1ST SESSION FELLOWSHIP PAYMENT SLIP) (df1)

PSN	SA/	NAMES			
ACADEMIC DEPARTMENT					
EMAIL					
TELEPHONE/MOBILE					
FIRST DEGREE		CLASS /CGPA		YEAR AWARDED	
SECOND DEGREE		CGPA		YEAR AWARDED	
OTHER QUALIFICATIONS					
CURRENT STUDY PROGRAMME					
NAME OF INSTITUTION					
REGISTRATION DATE					
APPROVED RESEARCH TOPIC					
SUPERVISORS NAME				CONTACT	
EXPECTED DATE OF FINISHING					
AMOUNT PAID (1ST SESSION)		AMOUNT REQUIRED (2ND SESSION)			
TOTAL AMOUNT PAID					
HOD (Comment on Progress report)				SIGN	
STAFF SIGNATURE		DIRECTOR ACADEMIC PLANING			
DEAN SIGNATURE		VICE CHANCELLOR			

To be filled by individual Academic Staff and returned to Academic Planning office



BAUCHI STATE UNIVERSITY GADAU, NIGERIA

ACADEMIC STATUS/DATA FORM (2ND SESSION FELLOWSHIP PAYMENT SLIP) (df2)

PSN	SA/	NAMES			
ACADEMIC DEPARTMENT					
EMAIL					
TELEPHONE/MOBILE					
FIRST DEGREE		CLASS /CGPA		YEAR AWARDED	
SECOND DEGREE		CGPA		YEAR AWARDED	
OTHER QUALIFICATIONS					
CURRENT STUDY PROGRAMME					
NAME OF INSTITUTION					
REGISTRATION DATE					
APPROVED RESEARCH TOPIC					
SUPERVISORS NAME				CONTACT	
EXPECTED DATE OF FINISHING					
AMOUNT PAID (2ND SESSION)		AMOUNT REQUIRED (3RD SESSION)			
TOTAL AMOUNT PAID					
HOD (Comment on Progress report)				SIGN	
STAFF SIGNATURE		DIRECTOR ACADEMIC PLANING			
DEAN SIGNATURE		VICE CHANCELLOR			

To be filled by individual Academic Staff and returned to Academic Planning office



BAUCHI STATE UNIVERSITY GADAU, NIGERIA
ACADEMIC STATUS/DATA FORM (3RD SESSION FELLOWSHIP PAYMENT SLIP) (df3) (PhD only)

PSN	SA/	NAMES			
ACADEMIC DEPARTMENT					
EMAIL					
TELEPHONE/MOBILE					
FIRST DEGREE				CLASS /CGPA	YEAR AWARDED
SECOND DEGREE				CGPA	YEAR AWARDED
OTHER QUALIFICATIONS					
CURRENT STUDY PROGRAMME					
NAME OF INSTITUTION					
REGISTRATION DATE					
APPROVED RESEARCH TOPIC					
SUPERVISORS NAME				CONTACT	
EXPECTED DATE OF FINISHING					
AMOUNT PAID (3RD SESSION)				AMOUNT REQUIRED (EXTENDED SESSION)	
TOTAL AMOUNT PAID					
HOD (Comment on Progress report)				SIGN	
STAFF SIGNATURE				DIRECTOR ACADEMIC PLANING	
DEAN SIGNATURE				VICE CHANCELLOR	

To be filled by individual Academic Staff and returned to Academic Planning office