



KWAME NKURUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY, KUMASI

APPLICATION FOR RENEWAL OF ADJUNCT APPOINTMENT

..... **ACADEMIC YEAR**

Application for Renewal of Adjunct Appointment as:

Name of Applicant:

Department: Faculty:

College: Date of Birth:

Contact Address:

Telephone number: E-mail:

Qualifications (degrees, certificates, diplomas with classes, distinctions, etc.) and membership or fellowship of Professional bodies, giving the dates on which each was obtained.

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Research Activities with Dates (where applicable)

Continue on separate sheet if necessary

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New Publications with Dates (where applicable)

Continue on separate sheet if necessary

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Signature of applicant

Date

For Official Use Only

1. **HEAD OF DEPARTMENT:** How do you assess the Candidate in the following areas?
(Rate; 1= Below Average, 2 = Average, 3 = Good, 4 = Very Good, 5 = Excellent)

- i. Teaching
- ii. Supervision/Promotion of Knowledge
- iii. Service
- iv. Conduct

RECOMMENDATION

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If positive, what courses would be taught by the applicant

No.	Code	Course(s)	Credit Hours

Signature:

Date:

2. RECOMMENDATION BY DEAN (where applicable):

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Signature:

Date:

3. COMMENTS OF THE COLLEGE APPOINTMENTS AND PROMOTIONS COMMITTEE SUB-COMMITTEE

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Signature:

Date:

(Chairman)

**Candidates should attach their current CV.*