UNIVERSITY OF IBADAN APPLICATION FOR CASH/ TOURING ADVANCE

1.	Application's Full Name:	
2.	(Surname first) Department:	Unit:
	Department Code (check on your pay slip):	
	Staff I/D No:	
	Date of 1 st Appointment:Appointme	
	Status:	
	Salary per Annum:	
	Amount of Advance Required:	
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9.	Name of bank:	Branch:
10.	. Account No:	Sort Code:
11.	. Purpose for which advance is required:	

12.	. Departmental Vote/Research Grant against whi	ch advance is required:
13.	. Date by which advance will retired:	
	(WARNING) Late submission of "statement" mexcept by addition to subsequent salary payment statement is received.	ay result in salary cut which cannot be refunded ent in the month following that in which the
14.	Applicant's signature and date	
	. Endorsement by Head of Department	
16.	Confirmation by Expenditure Control office (a) Any Outstanding Advances?	
		Availability of Fund in the Vote:
17. 18.	Approval by Bursar:	
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	Bursary Endorsement:	
Advance ofApproved for payment which, not retired, should be received from		
Salary in the month (s) of		
	thorizing officer's signature:	
Dat	te:	