UNIVERSITY OF GHANA
SCHOOL OF GRADUATE STUDIES

CLAIM FORM FOR SUPERVISORS OF THESES/DISSERTATIONS

Name of Candidate Supervised: …….

Date of Submission of Long Essay/Project/Dissertation/Thesis: ……

Year of Registration……..

Title of Long Essay/Project/Dissertation/Thesis: …….
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Date Of Approval of Supervisors by School Management Committee…….

Approved allowance(s) (Please Tick Appropriate amount)

(a) Dissertation……...…….GH₵ 564.00

(b) Thesis (MPhil)……..……... GH₵ 1128.00

(c)Thesis (Ph.D/MD/D.PHIL)……. GH₵ 2256.00

Name and Bank Details of Principal Supervisor

Name…….

Bank: ……

Account Number: ……

Branch……...……

Signature of Principal Supervisor/ Date …….

Names and Bank Details of Co-Supervisors and their Departments:

a. Name…….……

Bank……...…….

Account Number: ……

Branch…….…….

Signature of Co-Supervisor(s)/ Date ……

b. Name…….……

Bank……...…….

Account Number: ……

Branch…….…….

Signature of Co-Supervisor(s)/ Date ……

c. Name…….……

Bank……...…….

Account Number: ……

Branch…….…….

Signature of Co-Supervisor(s)/ Date ……

Signature of Director/Head & Date …….

Signature of Dean of Graduate Studies & Date …….

Total Fees Approved……. …….

OFFICIAL USE ONLY:

Degree Sought:
Date due for Submission:
Date Candidate Submitted:
Date Department Submitted:

Claimants should note that the amounts indicated are shared by the whole supervisory team

THESIS /DISSERTATION SUPERVISION ALLOWANCES
SHARING RATIOS

	PHD	**PHD**	**MPhil**	**MA/MSC**
	3 Supervisors	**2 Supervisors**	**2 Supervisors**	**1 Supervisor**
Lead supervisor	40%	60%	60%	100%
Co-Supervisor	30%	40%	40%	
Co-Supervisor	30%			