

UNIVERSITY OF MINES AND TECHNOLOGY, TARKWA

HUMAN RESOURCE UNIT

APPLICATION FOR STAFF ID CARD

SECTION A: (TO BE COMPLETI	ED BY AP	PLICA	NT) TEL N	VO:	
Name: (Surname First)					
Date of Birth:					
Designation/Rank:					
Department/Section:					
Date of Appointment in University:					
Staff No:					
Signature:	Date:				
SECTION B: (TO BE COMPLETE	D BY AR,	, HUMA	AN RESOUI	RCE UNIT)	
I confirm that Prof/Dr/Rev/Mr/Ms/ of the University and that the informat					is a staff
Name of Officer:					
Signature:	Date: .				
SECTION C: (TO BE COMPLETE	D BY TH	E HEAI	D, HUMAN	RESOURCE	E UNIT)
(Please tick ($$) the appropriate box)					
Approved for processing	[]			
NOT approved for processing	[]			
(Specify reason)					
Reason(s):			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	
Name of Officer:					
Signature:	Date	:			
SECTION D: (TO COMPLETED B	BY HEAD,	AUDIC	O VISUAL I	UNIT)	
ID CARD supplied	[]			
ID CARD NOT supplied	[]			
(Specify reason)					
Reason(s):			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	
Signature:					

(Copy of forms to be returned to the HR Unit after issuance of ID Card for filling)