



# THE FEDERAL UNIVERSITY OF TECHNOLOGY, AKURE

## OFFICE OF THE REGISTRAR

(Directorate of Establishment and Human Resource)

### STAFF ARRIVAL/ASSUMPTION OF DUTY FORM

NAME: \_\_\_\_\_

CONTACT ADDRESS (NOT P.O.BOX) \_\_\_\_\_

ARRIVING FROM (LAST EMPLOYER): \_\_\_\_\_

POSITION HELD IN LAST EMPLOYMENT \_\_\_\_\_

PRESENT STATUS (IN FUTA): \_\_\_\_\_

SCHOOL/DEPARTMENT/UNIT: \_\_\_\_\_

DATE OF ASSUMPTION: \_\_\_\_\_

SALARY ON ASSUMPTION (LEVEL AND STEP): \_\_\_\_\_

TYPE OF APPOINTMENT: (PERMANENT, CASUAL, TEMPORARY, CONTRACT, SABBATICAL, SIWES, VISITING LECTURER E.T.C) \_\_\_\_\_

STAFF CATEGORY: (JUNIOR, SENIOR ADMIN & PROFESSIONAL, ACADEMIC) : \_\_\_\_\_

BANK SALARY DOMICILLIATION: BANK \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ TYPE OF ACCOUNT \_\_\_\_\_

BANK VERIFICATION NUMBER (BVN) \_\_\_\_\_

HIGHEST QUALIFICATION: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ MOBILE NO: (+234) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

SEX: ( M / F ) MARITAL STATUS: \_\_\_\_\_ MAIDEN NAME: \_\_\_\_\_

NUMBER AND AGES OF CHILDREN: \_\_\_\_\_

STATE OF ORIGIN: \_\_\_\_\_ SENATORIAL DISTRICT \_\_\_\_\_

LOCAL GOVERNMENT: \_\_\_\_\_

NEXT OF KIN: \_\_\_\_\_

MOBILE NO (NEXT OF KIN): \_\_\_\_\_

Signature of Officer: \_\_\_\_\_

Date: \_\_\_\_\_

#### **COMMENT OF THE HEAD OF DEPARTMENT**

I confirm that: \_\_\_\_\_

assumed duty on: \_\_\_\_\_

Signature of HOD/HOU: \_\_\_\_\_

Date: \_\_\_\_\_

#### **TO THE BURSAR**

Please arrange to pay his/her salary and necessary claims with effect from: \_\_\_\_\_

\_\_\_\_\_  
**Mr. R. A. Arifalo**

*Registrar & Secretary to Council*

Date: \_\_\_\_\_