UNIVERSITY OF CAPE COAST

DIRECTORATE OF RESEARCH, INNOVATION & CONSULTANCY



THIRD CALL FOR APPLICATIONS FOR BEST RESEARCHER AWARDS 2017-18 ACADEMIC YEAR

APPLICATION FORM

PART I - ADMINISTRATIVE INFORMATION

<u>Please note</u>: Kindly provide answers or mark [X or ✓] where applicable in the application form. BCLRA applicants should complete Part I - IV only, while Part I - VIII (*leaving out Part IV*) pertains to BERA, BEdRA and ORA applicants.

The completed Best Research Award (BRA) application form must be submitted by email to DRIC (<u>dric@ucc.edu.gh</u>) not later than the deadline stipulated in the call for proposals (**Friday, 4th May, 2018 for all applications**). Submissions received after the deadline will not be processed.

1. Name of Applicant:

• •			
Surname:		First name:	Middle name:
2. Rank of Applicant:			
3. College:			
4. Faculty/School:			
5. Department:	•		
6. Institutional Email Address:			
7. Mobile Number:			
PART II – TYPE OF BE	ST RE	SEARCHER AWARD BEIN	NG APPLIED FOR

Best Evolved Researcher Award (BEdRA)

Outstanding Researcher Award (ORA)

Best College-Level Researcher Award (BCLRA)

PART III – NUMBER OF PUBLICATIONS

For each publication, provide the following information:

a. Full citation of article:

Author(s)	Yea r	Title	Jou	rnal	Vol No.	lssu e No.	Page s	Google Schola r Citatio ns	Inde x [*]
b. Number c Google Scho		tions on							
c. Presence on ResearchGate:		Yes							
			No						
d. Presence on Publons:		Yes							
			No						
e. Presence on Scopus:		Yes							
			No						
PART IV – CERTIFICATION									
Signature:				Date:					

For BERA, BEdRA and ORA Applicants

PART V – NUMBER OF RESEARCH GRANTS

a. Numb	er of research grants won:	:						
last f	number of proposals wi ive (5) years [<i>both suc</i> cessful]:							
c. For each successful proposal, provide the following information:								
Year Awarde d	Title	Amour t [<i>GH¢</i>]		Funding Agency		0	Status [On- going, Completed, Terminated]	
d. For each unsuccessful proposal, provide the following information:								
Year	Title		Proposed F Amount [GH¢]		Fund	Funding Agency		
	PART VI – PO							
a. For each engagement, provide the following information:								
Date	Issue/Subject Matter	Medium						
		Poli cy Brie f	News Brief	Keynot e Speech	t Disc	ndta ole cussio n	Developme nt of Policy	

b. Attach supporting evidence of policy engagement (<i>if available</i>) to	
application	

PART VII – PhD SUPERVISION

Provide the following information with respect to PhD supervision:

Capacity [Principal Supervisor, Co- Supervisor]	Academic Year	No. of PhD Candidates Completed						
PART VIII – CERTIFICATION								
Signature:	Date:							