

**PRESBYTERIAN UNIVERSITY
COLLEGE, GHANA**



**[CERTIFICATE IN ICT]
[APPLICATION FORM]**

Faculty of Science and Technology
Department of Information and Communication Technology

[The applicant should fill all columns in capital letters.
Tick (✓) mark the appropriate box where necessary.]

Paste Recent
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NAME: _____
(First name) (Middle name) (Last name)

DATE OF BIRTH (DD/MM/YY) ____/____/____

MARITAL STATUS: SINGLE MARRIED

GENDER: FEMALE MALE

QUALIFICATION: _____

LOCATION: _____

POSTAL ADDRESS: _____

E-MAIL ADDRESS: _____

TEL: _____

Emergency Contact:

Name: _____

Postal Address: _____

Tel: _____

I declare that information given in this form is true to the best of my knowledge.
If selected for the course, I agree to abide by the rules and conditions in force at
this College and laid down by the College from time to time.

Previous Knowledge or Skills _____

Applicant's Signature _____ Date (dd/mm/yy) ____/____/____

Course Fee – GH¢300

Course Duration – 2 Months

Lecture Periods – Monday to Wednesday (10:00 – 1:00 pm)

*NB: Please submit your application at the nearest Presbyterian University
College, Ghana (PUCG) campus*

Where did you first hear about this Course?

- [] friend [] PUCG Website [] Flyer
[] Social Media [] Poster [] PUCG SMS
[] Community Information System