



Presbyterian University College, Ghana

HND/DIPLOMA APPLICATION FORM

P. O. Box 59 Abetifi Kwahu
TEL: +233 (020)2277201 /2 /9 /10
Email: admission@presbyuniversity.edu.gh
Website: www.presbyuniversity.edu.gh

**PLEASE READ THE FOLLOWING INSTRUCTIONS
CAREFULLY**



I. All sections of this form should be filled or completed in BLOCK LETTERS, and returned to:

The Registrar
Presbyterian University College, Ghana
P. O. Box 59 Abetifi Kwahu
Or sent via email to: admission@presbyuniversity.edu.gh

II. Requirements for Admission; Attach

- Copies of results slip or Academic Certificates and Transcripts
- Two (2) Recent Coloured Passport Photos

III. Application Fees (Non Refundable)

GH¢50.00 for Ghanaian Students USD50 for International Students

SECTION A: PERSONAL DETAILS:

Surname:

Other names

Gender: Male Female

Marital Status: Single Married Other, Please Specify

Date of Birth: __/__/____ Nationality

Physical Address (Residence):

Postal Address.....

Email Address.....

Telephone No.....

SECTION B: NEXT OF KIN DETAILS (In Case of Emergency)

Name:

Relationship (*Tick as Appropriate*)

Father Mother Guardian Other, Please Specify

Physical Address (Residence):

Postal Address.....

Email Address.....

Mobile No.....

SECTION C: EDUCATIONAL BACKGROUND

Name of institution Attended (Second Cycle and above)

Name of Institution	Location	From YY	To YY	Qualification (SSSCE/WASSCE/HND etc)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Senior Secondary School/High School/Technical/Vocational School Grades

Kindly list the subjects taken and the grades obtained at the End-of School Certificate/Diploma examinations (e.g. SSSCE/WASSCE/‘O’ Level / ‘A’ Level Certificate Examinations OR Other Equivalents)

Subject	Grade	Subject	Grade
1. _____	_____	5. _____	_____
2. _____	_____	6. _____	_____
3. _____	_____	7. _____	_____
4. _____	_____	8. _____	_____

Other Certificate

Type of Certificate _____
 Awarding Board/Institution: _____ Date obtained _____
 Professional Registration No. _____ (where applicable)

SECTION D: PROGRAMME SELECTION

Mode of Study (tick as appropriate)

Regular Weekend

Campus of Choice (tick as appropriate)

Okwahu Campus Tema Campus Kumasi Campus

Please Select (Tick) which Programme You want to Apply For. You are Allowed Three (3) Choices – Ranked in order of Preference.

For each programme you select, please indicate in the far right column [1 for 1st; 2 for 2nd; 3 for 3rd Choice]

Select (Tick) Programme	Rank Your Choice [1,2,3]
HND in Information and Communication Technology	
Diploma in Business Administration	
Diploma in Public Administration	
Diploma in Public Relations	

SECTION E: DECLARATION BY APPLICANT

I hereby declare that to the best of my knowledge, the information I have given is correct.

Signature of the Applicant: Date:

SECTION F: FOR OFFICIAL USE ONLY

Application approved Not Approved Deferred

Reasons:

.....
.....

Officer's Name: Date:

Officer's Signature: