



Please read all the information in the shaded area carefully before completing this form. Please apply as early as possible to avoid disappointment as competition is severe. Please use black ink when completing this form
 Deadline for submission: 31st March 2017

Application form for 2016/2017 entry
 African Centre for Sports Studies Diploma / Certificate Admissions
 Completed forms should be returned to The Admissions Officer,
 African Centre for Sports Studies Ghana forms may also be submitted to
 Zenith University College behind Ghana International Trade Fair Centre La.

Personal information

Surname (family name) (BLOCK CAPITALS)
 This is the name under which your file will be registered. Change of name is not permitted after registration.

	Maiden surname (if applicable)
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Title
 please tick the title you normally use e.g. Mr etc.

Ms.	Miss	Mr.	Mrs.	Dr.	Professor	Other (please specify)
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Firstname(s) (given names)
 (BLOCK CAPITALS)
 Please write all your forename(s) in the order in which they normally appear initials are insufficient

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Date of birth
 Note the format: DD/MM/YY

Day	Month	Year	5	Sex	Male	Female
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Nationality

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Marital Status (Please tick)

Married		Single	
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Religion

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Communication with you

Email (one address only)
 Please ensure you provide an up-to-date email address here.

	telephone	
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Permanent home address.
 Your permanent home address. This address email address above will be used for correspondence unless you give an alternate address below.

Correspondence address
 Please leave this section blank if the address is the same as the address provided above

Name and address of parent/Guardian/
 Sponsored/Next of Kin
 Please give the name and address of a parent or next of Kin

Name	Address

Programme information
 Programme Preference
 Please state the code and full title of the programme(s) to which you are applying. You may list up to two choices provided you are academically qualified for each choice. Your choices will be considered in series starting with your first choice.

1st choice: programme code	title of programme					
<table border="1"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>					<table border="1"> <tr> <td style="width: 80%; height: 20px;"></td> </tr> </table>	

2nd choice: programme code	title of programme					
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Please refer to the next page for all degrees and their codes.
 Session Performance
 Please indicate your choice of session by ticking the appropriate box. Admissions to sessions is on first come first serve basis after payment of school fees.

Morning	Afternoon	Evening	weekend
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Entry Qualification
 Please list the qualification(s) with which you are applying

WASSCE	SSSCE	A' Levels	professional	Mature	Other(specify)

Education

Please list in chronological order all academic institutions attended. Also state the date during which you attended these institution(s)

	Dates Attended <i>(Example 2003-2005)</i>

Entry qualifications

Please list the qualifications with which you are applying, including grades obtained in every examination you took. Attach transcripts and photocopies of certificates of all examinations results you list below

Examination Title <i>(Example SSSCE)</i>				Month and Year attempted <i>(Example June 2005)</i>						Index number <i>(example 0111023456)</i>					
Subjects taken (please specify 1st, 2nd and/or 3rd attempts)	WASSCE GRADES			SSSCE GRADES			O' LEVEL GRADES			A' LEVEL GRADES			OTHER (SPECIFY)		
	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	
Endorsements															
Declaration and signature of applicant I declare that the statements on this form are correct. I understand that any offer of admission may be withdrawn if the information provided is fraudulent or if I cannot provide documented evidence.							Signature:						Date:		
Endorsement by Referee This form must be endorsed by someone of high repute who must read and sign the following declarations I verify that the applicant is personally known to me and that I have vetted both the photograph attached and the claims contained in this application and that to the best of my knowledge, the information can be said to be true.							Name:						Address:		
							Signature :								
Official use only															
Selected		Incoming Level									Signature :				
Not selected		Reasons if not selected									Date :				
Finance Office use Only			Receipt number			Sold by :									

Admission for mature student who do not meet the required educational qualification will be admitted subject to experience and interview.

Please pay your admission form into: African Centre for Sports Studies, Account Number 6010180910 Fidelity Bank ,Osu Oxford Street. Please attach your pay-in-slip to your admission form when returning the form to African Centre for Sports Studies. P. O. Box YK 1112 Kanda Estate, Accra.



PROGRAMS CODE

Sports Injury Management Certification (SIMC 001)
Sports Management Certification (SMC 002)
Sports Coaching Certification (SCC 003)
Sports Journalism Certification (SJC 004)
Sports Medicine Certification (SM 005)
Sports Television Production Certification (SLP 006)
Sports Marketing Certification (DSMKT 001)
Sports Human Resource Management Certification (DSHRM 002)
Sports Journalism and Commentary Certification (DSJ 003)
Sports Accounting Certification (DSACC 004)
Sports Law Certification (DSLBB 005)
Sports Finance Certification (DSF 006)
Sports Information System Certification (DSIS 007)

DIPLOMA IN SPORTS MANAGEMENT SPECIALIZATION

Sports Marketing (DSMKT 001)
Sports Human Resource Management (DSHRM 002)
Sports Journalism and Commentary (DSJ 003)
Sports Accounting (DSACC 004)
Sports Law (DSLBB 005)
Sports Finance (DSF 006)
Sports Information System (DSIS 007)
Sports Injury Management (SIMC 001)
Sports Management (SMC 002)
Sports Coaching (SCC 003)
Sports Journalism (SJC 004)
Sports Medicine (SM 005)
Sports Television Production (SLP 006)

