

GHANA INSTITUTE OF MANAGEMENT AND PUBLIC ADMINISTRATION (GIMPA)

AND

THE CHARTERED INSTITUTE OF LOGISTICS AND TRANSPORT-GHANA (CILT GHANA)



APPLICATION FORM FOR ADMISSION TO CILT PROFESSIONAL PROGRAMMES

(PLEASE COMPLETE FORM IN BLOCK CAPITALS AND ATTACH ALL RELEVANT CERTIFIED COPIES OF CERTIFICATES)

PROGRAMME APPLIED FOR.....

1. Dr./Mr./Mrs./Miss..... (strike out whichever is not applicable)

2. Surname:

3. First Name:

4. Other/Middle Names(s):

Affix Picture Here

(The names entered on this form must be the same in spelling and order as those used in all certificates; any name change must be supported with relevant documents)

5. (a) Date of Birth:
- (b) Nationality:
6. Marital Status: Single/Married: (Strike out whichever is not applicable)
7. Religion (if any) Christianity/Islam/Traditional/Other (Strike out whichever is not applicable)
8. (a) Name of Next of Kin:
- (b) Relationship to Candidate:

(c) Address/Telephone Contact of Next of Kin:

9. Educational Background: (List Certificates, Diplomas, Degrees etc. possessed, with dates)

| Date | | Institution | Qualification |
|------|----|-------------|---------------|
| From | To | | |
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(This information would be treated as confidential)

10. Address to which all communications in connection with this application should be sent:

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E-mail Address: Cell Phone Number:

11. Permanent Home Address:

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12. Present Occupation:

(b) No. of Years in current Occupation:

(c) Present Employer's Name and address:

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(d) Total Working Experience:

13. Are you being sponsored by your Employer? Yes/No:

14. If not being sponsored, state how you would finance your studies at GIMPA.

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NOTE: The GIMPA/CILT-Ghana provide no scholarships or any other form of financial assistance for students accepted for its programmes.

IMPORTANT:

AN APPLICANT WHO MAKES A FALSE STATEMENT MAY BE REFUSED ADMISSION OR, IF HE HAS ALREADY ENROLLED, HE/SHE MAY BE ASKED TO WITHDRAW FROM GIMPA.

DECLARATION

This declaration should be signed by the person who endorsed one of your passport-size photographs. This person should be the holder of a responsible position such as, the Headmaster of a Secondary School, Principal of a Teacher Training College, the Principal of a Technical Institute, a Senior Civil/Public Servant, a Lawyer, a Clergyman, a Senior Military or Police Officer, a Medical Officer.

NOTE: The application will NOT be valid if this declaration is not signed.

I CERTIFY THAT the photograph endorsed by me is the true likeness of the applicant.

Dr/Mr./Mrs./Miss.....
Who is personally known to me and I have inspected the certificates submitted by the applicant and, to the best of my knowledge, they are genuine.

Signature.....

Name.....

Status.....

Address.....

Stamp

Date.....20.....

NOTE: IN COMPLETING SECTION 9 IT IS IMPORTANT TO GIVE AN ADDRESS AND TELEPHONE CONTACT AT WHICH NOTICE OF ADMISSION WILL REACH YOU WITHOUT DELAY, SO THAT YOU CAN COMPLETE ADMISSION REQUIREMENTS EARLY.

APPLICATION:

Application forms can be obtained from the following websites: www.gimpa.edu.gh and www.ciltgh.org

Prospective participants may contact GIMPA at the following addresses and Telephone Numbers for further inquiries:

Programme Advisor
GIMPA-CMD (CILT Progs)
P.O. BOX AH 50
ACHIMOTA
Tel: 0302401681-3 ext 2125/2236
0303-930457/0303930458
Mobile: 050-1432845

The Administrative Officer
CILT (Ghana)
No. 3L, National Science Museum Chalets,
Adjacent Accra Workers' College
Tel: 0302939483