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**GHANA INSTITUTE OF MANAGEMENT AND PUBLIC ADMINISTRATION (GIMPA)  
AND  
CHARTERED INSTITUTE OF LOGISTICS & TRANSPORT (CILT)**

# CMD

**CENTRE FOR MANAGEMENT DEVELOPMENT**

**GIMPA BUSINESS SCHOOL**

**APPLICATION FORM  
FOR**

**INTERNATIONAL PROFESSIONAL CERTIFICATE  
IN LOGISTICS AND TRANSPORT (CILT)**

P. O.Box AH 50 Achimota; **Tel:** 0302 - 401681/2/3;  
**Ext.** 2125/2236 or 0303-930457/8 or 050-1432845  
**E-mail:** cmd@gimpa.edu.gh, **Website:** www.gimpa.edu.gh



Previous GIMPA ID Number (if applicable): .....

Name of Applicant (surname, first name and other names): .....

GHANA INSTITUTE OF MANAGEMENT AND PUBLIC ADMINISTRATION (GIMPA)
&
CHARTERED INSTITUTE OF LOGISTICS & TRANSPORT (CILT)

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GIMPA BUSINESS SCHOOL

APPLICATION FORM
FOR

INTERNATIONAL PROFESSIONAL CERTIFICATE
IN LOGISTICS AND TRANSPORT (CILT)

NB: The course consists of the following modules of which candidates must successfully complete four (4) through examinations (3 mandatory + 1 optional course)

LIST OF PROGRAMMES

MANDATORY (Compulsory)

- 1. Business Application
2. Business Theory
3. Supply Chain Management

OPTIONAL COURSES

(Please choose only one optional course)

- 1. Warehousing
2. Inventory
3. Passenger Transport Operations
4. Procurement
5. Freight Transport Operations
6. Transport Planning
7. Green logistics
8. Global Logistics
9. Port Operations

NB: Optional courses that do not have a minimum of fifteen (15) or more students will not run/be offered

SESSION (Pick one)

Weekday-Evenings (5:00 pm - 7:00 pm) Weekend (Saturdays only 8:00 am - 6:30 pm)

**NOTE: The application fee is GH¢ 150.00 and payment for it should be made to any of the following banks and account numbers: ECOBANK (038001442624701) or UNIBANK (0510110559613)**

**APPLICANTS ARE REQUIRED TO SEND THE COMPLETED FORM WITH PAYMENT VOUCHER TO:**

**The Program Advisor/ CILT Coordinator**

GIMPA CMD

P.O.Box AH 50 Achimota

Tel: 0302 - 401681/2/3 ext. 2125/2236 or 0303- 930457/8 or 050-1432845

E-mail: cmd@gimpa.edu.gh,

Website: www.gimpa.edu.gh

**WITH THE FOLLOWING ENCLOSURES:**

- i. Copies of certificates and any other relevant academic records (Original Transcript).
- ii. Original Transcripts not Result Slip. Must be in a sealed envelope with the signature and stamp of Registrar across envelope
- iii. One (1) recent passport sized photograph which should be endorsed by a Senior Public Officer above the rank of Assistant Director, Lawyer or a Medical Doctor and affixed to the form.
- iv. One self-addressed envelopes with a local express stamp.

**NOTE: (i) Photocopied documents should be certified from the source of the document e.g. WAEC, Polytechnic etc. or originals must be brought for verification.**

**PERSONAL DATA**

PROGRAMME APPLIED FOR.....

- 1. Dr./Mr./Mrs./Miss.....(strike out whichever is not applicable)
- 2. Surname: .....
- 3. First Name: .....
- 4. Other/Middle Names(s): .....
- (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		

***(This information would be treated as confidential)***

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

.....  
 .....

E-mail Address: ..... Cell Phone Number: .....

11. Permanent Home Address: .....  
 .....

12. Present Occupation: .....  
 (b) No. of Years in current Occupation: .....  
 (c) Present Employer's Name and address: .....  
 .....  
 (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.  
 .....  
 .....

***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/SHE 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](http://www.gimpa.edu.gh) and [www.ciltgh.org](http://www.ciltgh.org)

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

**Programme Advisor/CILT-Coordinator**

GIMPA-CMD  
P.O. BOX AH 50  
ACHIMOTA  
Tel: **0302401681-3 ext 2125/2236**  
**0303-930457/0303930458**  
Mobile: **050-1432845**  
E-mail: **cmd@gimpa.edu.gh**  
Website: **www.gimpa.edu.gh**

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