

ANGLICAN UNIVERSITY COLLEGE OF TECHNOLOGY

Affix Passportsize Photograph

here

APPLICATION FOR ADMISSION TO UNDERGRADUATE PROGRAMS

APPLICANTS TO NOTE

- i. Please include photocopies of certificates and other relevant documents.
- ii. Mature applicants should attach a copy of their birth certificate.
- iii. Completed applications should be sent (together with a payment order/bankers draft of **GHC 100.00**) via post to the address on page 4 of this form.
- iv. Attach two passport size Photographs on the form.
- v. For details on entry requirements for the various programmes please visit www.angutech.edu.gh or call 0505091054
- vi. An Applicant who makes a false statement on the form shall be refused admission, and/or if he has already been admitted, shall be withdrawn from the University College.

Section 1 PERSONAL INFORMATION (IN BLOCK LETTERS)

1)	Surriame.
ii)	First name:
iii)	Other names:
iv)	Gender: Male [] Female []
v)	Nationality
vi)	Date of Birth
vii)	Hometown
viii)	Region
ix)	Postal Address
x)	Email Address.
xi)	Phone Number(s).
	PARTICULARS OF PARENTS/GUARDIANS
(i)	Name:
(ii)	Relationship:
(iii)	Occupation:
(iv)	Phone Number:
(v)	Email Address:
(vi)	Address:

1 | Page

Top up Taxamination Details (Name of Institution xamination Grades	Mature		Year of Exam	Exam Centre	
Name of Institution Name of Institution	Type of Exam: SS			Exam Centre	
Name of Institution				Exam Centre	
xamination Grades	Type of Exam	Index Number	Year of Exam	Exam Centre	
			ı	I	
ate.					
,13		Grades			
		1 st Sitting	2 nd Sitting	3 rd Sitting	
TIVES					
		TIVES	TIVES	TIVES TIVES	

2d. Details of other qualifications (e.g. HND, Diploma, etc.)									
Qualification		From (Month/Year)		To (Month/Year)					
2e. Previous Colleges/ Ur									
Name of Institution	Year of	Course/Programme	Last year	Reason for leaving					
	Entry		Study						
Section 3 CHOICE OF PROGRAMME OF STUDY(Refer to the program catalogue at section 7)									
Please indicate the programmes y			, , , , , , , , , , , , , , , , , , , ,	,					
Order	·	Programme Title							
1		8							
2									
3									
4									
				_					
Section 4 SOURCE	OF FUNDIN	NG							
Please indicate source of fu	nding								
Personal:									
Study Leave:									
Student Loan:									
3 Page									

Section 5	LANGUAGE REQUIREMENTS							
Is English yo	our first language Yes No							
If English is not your first language, provide details of English qualification and test scores.								
Section 6	ADDITIONAL INFORMATION							
How did you tick all that a	-	rsity College of Technology (ANG.U.TECH). Please						
Text Messag	Banner Banner NG.U.TECH) ge from ANG.U.TECH from ANG.U.TECH Staff on by ANG.U.TECH Staff air	(Please state the Name if he/she is a						
Section 7	DECLARATION							
I hereby acknow	owledge that the information provided i	s true and correct.						
Date//	20	Applicant's Signature						
Please complete this form and return to the address below, together with a payment order of GHS 100.00 from any local bank of your choice.								
For Nk	coranza Campus:	For Kumasi Campus:						
ANGLIC (NKORA P. O. BO NKORA	SISTANT REGISTRAR AN UNIVERSITY COLLEGE OF TECHNOLOGY ANZA CAMPUS) DX 78 NZA - GHANA. 33246007439, + 233505091054	THE REGISTRAR ANGLICAN UNIVERSITY COLLEGE OF TECHNOLOGY (KUMASI CAMPUS) P. O. BOX HN 2990 ASHANTI NEW TOWN – KUMASI, GHANA TEL: 0322497225/ +233 0594698137						

Section 8 LIST OF PROGRAMMES

*** NKORANZA CAMPUS**

- SCHOOL OF FOOD AND HEALTH SCIENCES
- 1. B.Sc. Health Information Management
- 2. B.Sc. Community Medicine & Health (Physician Assistantship)
- 3. B.Sc. Nursing
- 4. Diploma in Midwifery
 - FACULTY OF AGRICULTURE AND SOCIAL SCIENCES
- 5. B.Sc. General Agriculture
- 6. B.A. Development and Management Studies

*** KUMASI CAMPUS**

- SCHOOL OF BUSINESS STUDIES
- 7. BSc. Business Administration
 - a. Accounting
 - b. Banking and Finance
 - c. General Management
 - d. Logistics and Supply Chain Management
 - e. Marketing
 - f. Human Resource Management
 - SCHOOL OF FOOD AND HEALTH SCIENCES
- 8. BSc. Physician Assistantship