



electronic copy

attach photographs

postgraduate application form

All relevant sections must be completed in black or blue ink. Please use CAPITAL Letters.

1. PERSONAL DETAILS

Surname Name (as on all official documents).....

First Name (s).....

Title..... Sex Male Female.....
(Mr/Mrs/Miss/Dr/Rev)

Date of Birth (DD-MM-YYYY)

Country of Birth.....

Country of Residence.....

Nationality.....

2. ADDRESS

Home address

Postal address.....
(street address or post box).....

.....

City/town.....

Country.....

Telephone (official).....

Cell phone (private).....

Fax.....

Email.....

Alternative address - if different from Home

Postal address.....
(street address or post box).....

.....

City/town.....

Country.....

Telephone.....

Cell phone (private).....

Fax.....

Email.....

3. EDUCATION BACKGROUND

3.1 Examining authority.....
Name and address of school.....
Year of examination.....

'O' level

Subjects	Results/grade	Overall grade

3.2 Examining authority.....
Name and address of school.....
Year of examination.....

'A' level

Subjects	Results/grade	Overall grade

3.3. Undergraduate degree
 Certified photocopies of results and certificates must be attached to this application form

University/institute/college	Duration of course	Qualification obtained	Date obtained	Mode of study (FT/PT/RL*)

3.4. Any other qualifications
 Certified photocopies of results and certificates must be attached to this application form

University/institute/college	Duration of course	Qualification obtained	Date obtained	Mode of study (FT/PT/RL*)

*FT= Full Time, PT=Part Time, RL= Remote Learning

4. EMPLOYMENT AND PROFESSIONAL QUALIFICATIONS

4.1. EMPLOYMENT INFORMATION

Employer (include City and Country)	Position	Dates	
		From	To

4.2. PROFESSIONAL QUALIFICATION

Details of any professional qualifications obtained if any

Qualification	Date obtained

5. PROPOSED PROGRAMME OF STUDY

Please indicate the desired Modality (FT for Full-time, PT for Part-time and RL for Remote Learning)

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6. PERSONAL STATEMENT

Please provide a short statement indicating why you wish to undertake this programme.

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7. ENGLISH LANGUAGE PROFICIENCY

Please indicate your level of competency in English.

	Speaking	Reading	Writing
Fluent			
Adequate			
Basic			

Do you have any English language qualifications? Yes..... No.....
 (such as TOEFL, IELTS, other, or a university degree in which instruction was in English)
 If yes, which qualification?.....
 Date of examination.....

8. EQUAL OPPORTUNITY

The University welcomes all students and therefore, strongly encourages you to disclose any disability or medical condition which may have an impact on your studies while at the university. This will help us plan and put the necessary facilities in place.

- No disability
- Blind/partially sighted
- Wheelchair user/mobility difficulties
- Unseen disability e.g diabetes, pressure, epilepsy etc.
- Others (please indicate).....

9. REFEREES

Please give the names and addresses and position of two people that you wish to use as your referees. They should be able to testify to your academic ability or relevant experience and one should be your head of department or employer as appropriate. The letters of reference should be enclosed in sealed envelopes with this application form.

1. Name..... Position.....
 Institution or company name.....
 Institution of company address.....
 Email address..... Telephone
2. Name..... Position.....
 Institution or company name.....
 Institution of company address.....
 Email address..... Telephone

10. DECLARATION

I confirm that the information given on this form is to the best of my knowledge true, correct and accurate, no information requested or other material information has been omitted and that I have completed the application form myself.

Signed..... **Date**.....