

INSTITUTE OF LOCAL GOVERNMENT STUDIES

Building Capacity for Local Governance

UNDERGRADUATE APPLICATION FORM

Instructions for completing the Application Form

- 1. Please read the instructions carefully and complete all applicable sections.
- 2. Incomplete Application Form will not be processed.
- 3. Only **ONE** Application Form per applicant.
- 4. An applicant is requested to complete the Application Form in **BLOCK LETTERS** with all the relevant information as required.
- 5. Ensure copies of certificates/ results slips and any other relevant academic records are enclosed.
- 6. Two (2) recent Passport sized Photographs, one of which should be affixed to the form. The other 2 should be endorsed by a Senior Public Officer above the rank of Assistant Director, Lawyer or a Medical Doctor.
- 7. Two stamped self-addressed express envelopes.
- 8. Mature Applicant (Mature candidates are applicants who are 25 years and above but do not have the minimum academic qualification for direct admission) should include in the Application Form copies of his/her **Birth Certificate**.
- 9. The Institute shall not be responsible for any negligence on the part of any applicant.

NOTE: The application fee is non-refundable:

1. Ghanaians: GH¢100.00

2. West African / African Nationals: USD50.00

3. Other foreign nationals: USD100.00

MODE OF PAYMENT: Pay-in Slip or banker's Draft to be made payable to the Institute of Local Government Studies.

Applications are open from 1st January, 2023 to 1st September, 2023

INSTITUTE OF LOCAL GOVERNMENT STUDIES **Building Capacity for Local Governance** This Form should be completed and returned with a payment voucher to: Passport Photo The Dean of Studies and Research Institute of Local Government Studies P.O. Box LG 549 Legon. E-mail: studies@ilgs.edu.gh OR deanofstudies@ilgs.edu.gh Tel: (+233) (0) 599 01 7300 (+233) (0) 599 05 1700 (+233) (0) 596 06 0212 Academic Year: Applicant should indicate by ticking the preferred Admission Programme, Campus and Session as specified below: SECTION A: SELECT YOUR PROGRAMME BSc. Governance and Development Studies BA. Public Sector Management BA. Community Development BA. Social Development Diploma In Community and Social Development QUALIFICATION OF APPLICANT: WASSCE SSSCE GCE MATURE OTHERS (specify)..... **SESSION** (tick one) Regular Weekend Modular **CAMPUS** (tick one) Accra **Tamale**

SECTION B: PE	RSC)NAI	J DE	IAIL	5						ı			1	1
1. Title (Mr./Mrs./	Miss/	etc.)													
2. Surname:															
3. First Name:															
4. Other Name(s)) [
5. Date of Birth	[] 6	Sex: N	Male		Fema	ale [
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7. Town & Countr	ry of	Birth	١							&			• • • • • •		
8. Hometown															
9. Region:				<u> </u>	<u> </u>			<u> </u>			<u> </u>			<u> </u>	
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10. Nationality															
11. Marital Status										12.1	No. of	`Chile	dren		
13. Religion:14. Postal Address	s to v	which	all c	ommi	unicat	tions i	n con	nection	on wit	h this	appli	cation	n sho	uld be	esent
15. Email:															
16. (a)Phone No:															
(b). Ghana Card No.															

Residential/Digit	al Address:		
17. Emergency Cont (a) Name	act [1]		
(b) Relationship:			
(c) Phone No.			
(d) Email:			
a) Name			
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(b) Relationship:			
(c) Phone No.			
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	lly disabled or do you suffette the nature of disability Visual	er any form of handicap? Ye	No Hearing
Cerebral Palsy	Blindness Dyslexia	Dyslexia	Deafness
Paraplegic	Low vision	ADD/ADHD	Partial Hearing
Quadriplegic	Partially sighted	Dyscalculia	
Impaired mobility	Other		

19. (a) Name of Fa	her				1
(b) Occupation:					
(c) Phone No.					
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(d) Email:					
20. (a) Name of Mo	other				
(b) Occupation:					
(a) Dhana Na					
(c) Phone No.					
(d) Email:					
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SECTION C: ED	JCATIONA	AL HISTORY			
21. Secondary Scho	ools and Col	leges attended			
			Т-	Ovalification (2) Obtained	
School/College		From (Month, Year)	To (Month, Year)	Qualification(s) Obtained	

22. Details of results of examinations taken as	s applicab	le. (indicate subj	ects and grades at a	ll attempts)
Index Number (1st Attempt)				
Index Number (2 nd Attempt)				
Index Number (3 rd Attempt)				
<u></u>				
WASSCE				
Subjects			Grades	
		1st Attempt	2 nd Attempt	3 rd Attempt
Aggregate				
Aggregate				
SSSCE				
Subjects		Grades		
		1 st Attempt	2 nd Attempt	3 rd Attempt

Aggregate		

GCE

Subjects	"O" Le	vel Grade	es .	"A" Lev	el Grad	es
	1 st	2 nd	3rd	1 st	2 nd	3 rd
Aggregate						

Name of Institution	Date		Programme	Class		CGPA
Name of institution	From	То	Trogramme	Class		CGI
24. Other Qualifications						
Name of Institution	Date		Programme	Certificate	e	
	From	To				
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25. Applying as Mature Cand	idate? (Mature	e candidates	are applicants who	are 25 years a	anu abb	
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section C: EMPLOYN 26. Employment History (in Employer	qualification f	or direct adm	ission) Yes	No	I	Date
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Campus: Accra Tamale	e liable for any false declaration or withholding of relevant information. Applicant's Signature	27. Declara	ion					
28. Endorsement The declaration in 31 above, must be endorsed below by someone of high repute. The person be a member of the Clergy, Senior Public Servant (above the rank of Assistant Director), Lawyer or Medical Doctor. Name	8. Endorsement The declaration in 31 above, must be endorsed below by someone of high repute. The person be a namber of the Clergy, Senior Public Servant (above the rank of Assistant Director), Lawyer or Medical Doctor. Name		-	_	-		-	e records. I will
The declaration in 31 above, must be endorsed below by someone of high repute. The person be a member of the Clergy, Senior Public Servant (above the rank of Assistant Director), Lawyer or Medical Doctor. Name	Che declaration in 31 above, must be endorsed below by someone of high repute. The person be a nember of the Clergy, Senior Public Servant (above the rank of Assistant Director), Lawyer or Medical Doctor. Date	Applicant's	Signature	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	Date	•••••
Date	Date	28. Endorse	ment					
Decupation	Occupation	member of	the Clergy, Senio	-		•	0 1	•
Business Address Business Phone No	Official Use Only Application Fee GH¢ Bank Draft No/Receipt No Received and acknowledged by: Signature of officer: Date: Applicant Admitted? Yes No Date of Admissions Programme Admitted to: School: Regular Weekend Modular Campus: Accra Tamale	Name			I	Date	Signature.	
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Programme Admitted to: School: Regular	Programme Admitted to: School: Regular	Business Pl Application Bank Draft I	Fee GH¢	y:	Official Us	Mobile No		
School: Regular Weekend Modular Campus: Accra Tamale	School: Regular Weekend Modular Campus: Accra Tamale	Business Pl Application Bank Draft I	Fee GH¢	y:	Official Us	Mobile No		
Campus: Accra Tamale	Campus: Accra Tamale	Application Bank Draft 1 Received an Signature of	Fee GH¢	y:	Official Us	Mobile No	Date:	
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Remarks	lemarks	Application Bank Draft 1 Received an Signature of Applicant A	Fee GH¢	y:	Official Us	Mobile No	Date:	
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