

SCHOOL OF GRADUATE STUDIES AND RESEARCH



**CENTRAL
UNIVERSITY**

FAITH • INTEGRITY • EXCELLENCE

APPLICATION FORM FOR 2024/2025 ADMISSIONS TO GRADUATE DEGREE PROGRAMMES

IMPORTANT: CANDIDATES ARE REQUESTED TO SEND TWO COMPLETED FORMS TO:

School of Graduate Studies
P. O. Box DS 2310
Dansoman
Accra

Previous CU Student ID Number
(Where applicable)

Affix a recent passport photograph in the box

i. **Application Fee** (non-refundable)

Cash or Bankers Draft to be paid to Central University
Applicants from outside Ghana are requested to pay \$100.00 or the cedi equivalent.

ii. Submit the completed application form with the following documents: **Two certified true copies** of certificate(s), **ONE ORIGINAL** transcript of academic records and **Two (2) referee's reports** to The Assistant Registrar, Central University, School of Graduate Studies, P. O. Box DS 2310, Dansoman, Accra. Transcripts not sent directly to the Assistant Registrar of the School of Graduate Studies will not be accepted.

iii. **General Admission Requirements:** A minimum of Second Class degree or its equivalent from a recognised institution is required for admission. Applicants with Third Class or Pass degrees will be required to pass an interview and thereafter, take 4 weeks of preparatory courses and pass a written examination to qualify for admission. **Programme specific requirements may be used where applicable.**

Personal Data

1. Surname (family name) (BLOCK CAPITALS)

2. Title
Please tick (✓) Mr. Mrs. Miss Rev. Dr.

3. First name(s) (given names) (BLOCK CAPITALS)
Please write in full.

4.	Gender	Male	Female	Date of birth	Month	Day	Year
5.	Place of Birth				Religion		
6.	Home Town				Region/Country		
7.	Nationality						
8.	Marital Status				No. of Children (If any)		
9.	If married, spouse's full name						

10. Address to which all communication with this application should be sent:

11. Telephone Number(s) E-mail Fax (if any)

12. Permanent Home Address:

13. Name and Address of Parent or Guardian:

14. Relationship of Guardian to candidate:

15. Academic Information

Name of Previous University & Location	Dates of Attendance From To	Degree or Diploma Awarded	Year of Award	Class Obtained

16. Academic Prizes or Honours awarded

17. **Employment Records** (*particulars of past and present employment records*)

Company	Dates	Position

18 Degree for which candidate proposes to study (indicate in the space provided).

CENTRAL BUSINESS SCHOOL

- MBA (Finance)
- MBA (Human Resource Management)
- MBA (General Management)
- MBA Agribusiness -18 months
- MBA Marketing -18 months
- MBA Project Management -18 months
- MSc Accounting
- MPhil Accounting

SCHOOL OF MEDICINE AND HEALTH SCIENCES (SMHS)

- Master of Public Health

WILLIAM OFORI-ATTA INSTITUTE OF INTEGRITY (WOAII)

- Executive Masters in Leadership and Governance

FACULTY OF ARTS AND SOCIAL SCIENCES

- MPhil Theology
- MPhil Economics
- MA Religious Studies
- MA Sacred Ministry
- MA Development Policy
- MPhil Development Policy
- MPhil Education
- MA Education

- MA Communication Studies
- MA Educational Leadership & Administration
- MPhil Educational Leadership & Administration

- Postgraduate Diploma in Education
- MPhil Guidance and Counseling

- 19 **Planned Campus/Session of study**
- | | | | | |
|---------------|---------|--------------------------|---------|--------------------------|
| Accra | Evening | <input type="checkbox"/> | Weekend | <input type="checkbox"/> |
| Miotso | | | Weekend | <input type="checkbox"/> |
| Kumasi | Evening | <input type="checkbox"/> | Weekend | <input type="checkbox"/> |

Thesis Proposal (For PhD and MPhil applicants only)

20. Indicate here the title of your intended thesis proposal and attach a 2-3 page A4 size paper of the proposal (typed).

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- 21 a. **Name and Address of two referees-One Academic & One Professional (For MBA Applicants ONLY)**

Name	
Address	
Name	
Address	

- 21 b. **Name and Address of two Academic referees (For Other programmes)**

Name	
Address	
Name	
Address	

22. **AN APPLICANT WHO MAKES A FALSE STATEMENT OR WITHHOLDS RELEVANT INFORMATION SHALL BE REFUSED ADMISSION. IF HE/SHE HAS ALREADY BEEN ADMITTED INTO THE UNIVERSITY, HE/SHE SHALL BE ASKED TO WITHDRAW.**

23. **DECLARATION**

Declaration and Signature of Applicant

I declare that all the documents and information I have provided are accurate, true and completed, and that I hold myself responsible for the authenticity, veracity and accuracy of the documents.

Signature

Date

24. If you have any questions, please call +233 (0)302-971203, +233 (0)302-313181 or Email: sgs@central.edu.gh Admissions Office (WhatsApp) +233 (0)307 020 540

Official Use Only

<i>Application Fee</i>		<i>Receipt No.</i>	
<i>Date</i>		<i>ID No.</i>	

STATUS OF APPLICATION

<i>ACCEPTED / NOT ACCEPTED</i>	
<i>SIGNATURE OF OFFICIAL</i>	

Note: All documents in connection with this application becomes the property of this University.

INSTRUCTIONS:

KINDLY TICK ONLY ONE ANSWER FOR EACH QUESTION.
WHERE YOU ARE REQUESTED, PLEASE PROVIDE MORE RESPONSES.

1. How did you get to know about Central University?

- Social media An individual (word of mouth reference) University publications (e.g. catalogues, brochures, flyers etc.)
 Newspaper Television Billboards ICGC Churches Radio University website

2. From what medium did you obtain the most directly relevant information about Central University or your course at the time you applied?

- Radio Newspaper Family/Parents Friends Church Former Students of Central University Social Media

3. Where did you get information about the Central University admissions at the time you applied?

- Parents Friends T.V Radio University website Campus visit On The Spot outreach team
 Online Others

4. What influenced your choice of Central University?

- Family and friends Location of University Catchy Central University advert No other option available to me
 Program of study Beautiful campus

5. On a scale of 1-5, how would you rate the application process with regards to ease?

Where 1 means it is difficult and 5 it is easy

- 1 2 3 4 5

6. State your last school attended