



THE REGISTRAR
Zenith University College
P. O. Box TF 511
Trade Fair, La. Accra.

- i. Non-refundable application of GH¢30 cash or Bankers Draft made payable to Zenith University College
- ii. Certified photocopies of result slips or certificates.
- iii. Four stamped self-addressed envelope
- iv. Three recent passport-sized photographs (One of the photographs should be endorsed by the same person who makes the declaration at the end of this application. Names should be written on the back of the remaining photographs.)
- v. Confirmation of results from **WAEC** or relevant awarding/examining body (ies)

Affix one of the two unendorsed passport-sized photographs here and clip the endorsed one on the second form

a **Name:** (Names must correspond exactly with those used for all examinations taken. Provide legal proof for any change in name.)

[illegible][illegible]

Sex: male ☐ female ☐ (please tick)

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d d m m y y y y

f. Nationality g. Hometown.....

h. Region..... i. Country.....

j. Marital Status: Single ☐ Married ☐ k. Religion.....

l. Permanent Home Address (Residence include house number)

.....

.....

m. Communicating Address: (Address to which communication in connection with this application should be sent)

(1)Postal Address.....

.....

(2)Tel. No..... (3) Mobile No.....

(4) Email

n. Physical Ability: (Information will be treated as confidential)

Are you physically disabled or do you suffer any form of handicap? Yes/No.

If Yes, please state the level of intensity and complexity

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2. EDUCATIONAL LEVEL (Indicate type of qualification you are using to seek admission)

a. SSS ☐ b. 'O' Levels ☐ c. 'A' Levels ☐ d. Certificate ☐

e. Diploma ☐ f. Graduate ☐ g. Other (Please specify).....

3. EDUCATION DETAILS

(Indicate details of secondary school(s), training college(s) polytechnic(s) and university (ies) attended)

Name of Institution & Location	Attendance Dates		Offices held & athletic or other activities at school
	From	To	

4. EXAMINATION DETAILS

(a) Indicate 'A' level grades obtained in each attempt in their respective columns

SUBJECT	1 st Attempt	2 nd Attempt	3 rd Attempt
	Month: Year: Index No.	Month: Year: Index No.	Month: Year: Index No.
	GRADE	GRADE	GRADE

(b) Indicate 'O' level grades obtained in each attempt in their respective columns

SUBJECT	1 st Attempt	2 nd Attempt	3 rd Attempt
	Month: Year: Index No.	Month: Year: Index No.	Month: Year: Index No.
	GRADE	GRADE	GRADE

(c) Indicate **SSSCE/ WASSCE** grades obtained in each attempt in their respective columns.

[illegible]

(d) Details of Qualifications at the Tertiary Level.

Degree or other Qualification	Name of Univ. or Inst.	Year Completed	Hons/Major Discipline	Final Grade

Note

Add copies of all certificates. Official transcripts will be required from your previous University, College or Institution. These have to be provided directly by your former University or College authorities. Photocopies of certificates or result slips will not be substitutes for the transcripts.

5. COURSE PREFERENCE

Refer to courses listed below and indicate preference for the professional course you wish to be admitted into:

A. Association of Business Executives - ABE

- | | | |
|---------------------------------|------------------------------|--------------|
| 1. Business Management | 2. Human Resource Management | |
| 3. Business Information Systems | 4. Financial Management | 5. Marketing |

B. Confederation of Tourism & Hospitality – CTH

- | | |
|---------------------------|-----------------------|
| 1. Hospitality Management | 2. Tourism Management |
|---------------------------|-----------------------|

6. COURSE LEVEL

A. Association of Business Executives - ABE

Business Management	<input type="checkbox"/> Certificate	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip
Business Information Systems	<input type="checkbox"/> Certificate	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip
Human Resource Management	<input type="checkbox"/> Certificate	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip
Marketing	<input type="checkbox"/> Certificate	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip
Finance Management	<input type="checkbox"/> Certificate	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip

B. Confederation of Tourism & Hospitality – CTH

Hospitality Management	<input type="checkbox"/> Intro to Dip	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip
Tourism Management	<input type="checkbox"/> Intro to Dip	<input type="checkbox"/> Dip Part 1	<input type="checkbox"/> Dip Part 2	<input type="checkbox"/> Adv. Dip

All courses are subject to a minimum enrolment of 15 students, failing which the course will not be held. In the event of a course being full or not being available during a particular semester, students will be counseled to enroll on a related course or to defer the course to the next semester.

7. EMPLOYMENT

Full particulars of past and present employment with dates

Institution	Position	Dates

8. SOURCE OF FINANCE

Indicate how you will finance your study at the College (Tick appropriate box)

- a. ☐ Self b. ☐ Guardian c. ☐ Corporate Sponsorship
- d. ☐ Other Specify.....

Note:

- Fees are to be paid in full on registration at the beginning of every semester.
- Fee paid are non-refundable once a programme is started. Please refer to Prospectus for other terms and conditions of admission.

9. PARTICULARS OF PARENT/GUARDIAN/SPONSOR

- a. Name of Parent/Guardian or Sponsor.....
- b. Relationship to Parent/Guardian or Sponsor
- c. Occupation of Parent/Guardian or Sponsor
- d. Address of Parent/Guardian or Sponsor
- (1)Postal Address
-
- (2)Tel. No.....(3) Mobile No
- (4) Email

10. PREVIOUS ADMISSION DETAILS

If you have ever been admitted to this College, you must supply the following information

Year of Admission	Course of Study	Last Year in College	Reasons for leaving

11. STUDY OPTION

OPTION	DAYS	TIME	TICK
Day	Monday – Friday	8.30 am – 3.30 pm	
Evening	Monday – Friday	5.30 pm – 8.30 pm	
Weekend	Friday	5.30 pm – 8.30 pm	
	Saturday	8.30 am – 6.30 pm	

12. HOW DID YOU HEAR ABOUT ZENITH UNIVERSITY COLLEGE? (Please tick)

- a. Newspaper ☐ b. Radio ☐
- c. Television ☐ d. Website ☐
- e. School ☐ f. Former/current student ☐
- g. Friends/family ☐ h. Other (Please specify).....

13. APPLICANT'S SIGNATURE

Signature of applicant..... Date.....

14. DECLARATION

This declaration should be signed by someone of high repute who should also endorse one of the passport-sized photographs on the reverse side. This person should be a Senior Public Servant belonging to the learned professions (e.g. a clergyman, lawyer, medical practitioner etc.). 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 Mr./Ms/Mrs./ Dr/ Rev
..... who is personally known to me. I have inspected his/her certificates and I
am satisfied that the names on them conform to those by which to the best of my knowledge, he/she is officially
known.

Signature.....

Name.....

Status.....

Address.....

IMPORTANT

AN APPLICANT WHO MAKES A FALSE STATEMENT OR WITHHOLDS RELEVANT INFORMATION MAY BE REFUSED ADMISSION. IF HE HAS ALREADY COME INTO THE COLLEGE, HE MAY BE ASKED TO WITHDRAW.

FOR OFFICE USE ONLY	
Application Fee	Qualification vetted by
Receipt No.....	Name
Date.....	Status.....
	Signature.....
	Date.....