



## APPLICATION FORM FOR ADMISSION TO B.B.A. COURSES

**IMPORTANT :** CANDIDATES ARE REQUIRED TO SEND TWO COMPLETED FORMS TO

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

COMPLETED FORMS SHOULD REACH THE REGISTRAR NOT LATER THAN.....  
.....WITH THE FOLLOWING ENCLOSURES.

- i. Application fee.....
- ii. Certified photocopies of results 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 at 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

## 1. PERSONAL DETAILS

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

Surname

[illegible]

### Other Names

[illegible]

- b. Title: Mr./Mrs./Ms./Rev./Dr. Other.....  
(please underline)

- c. Sex: male ☐ female ☐ (please tick)

- d. Date of Birth \_\_\_\_\_ e. Place of Birth \_\_\_\_\_

d	d	m	m	y	y	y	y

- f. Nationality..... g. Hometown.....

- h. Region..... il. Country.....

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

- I. Permanent Home Address (Residence, include house number).....

m. **Communication 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) PLEASE TICK.**

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

If Yes, please state the level of intensity and complexity .....

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

- a. ☐ SSS      b. ☐ 'O' Levels      c. ☐ 'A' LEVELS  
d. ☐ HND      e. ☐ ABE Certificates      ☐ ABE Diploma      ☐ ABE Advanced Diploma  
f. ☐ Degree      g. ☐ Other Certificates and Diplomas (please state) .....

**3. EDUCATIONAL 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**

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

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

(c) Indicate SSS/WASSCE grades obtained in each attempt in their respective columns

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

(d) Details of Qualifications at the Tertiary Level

Degree of Qualification	Name of Univ. or Inst.	Year Completed	Hons/Major Disciplines	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 substitute for the transcripts.**

**5. COURSE PREFERENCE**

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

**\* BACHELOR OF BUSINESS ADMINISTRATION - BBA**

- |  |   |
|--|---|
| 1. <input type="checkbox"/> Business management          | 2. <input type="checkbox"/> Human Resource Management |
| 3. <input type="checkbox"/> Financial Management         | 4. <input type="checkbox"/> Marketing                 |
| 5. <input type="checkbox"/> Business Information Systems | 6. <input type="checkbox"/> Tourism Management        |
| 7. <input type="checkbox"/> Hotel Management             | 8. <input type="checkbox"/> Accounting                |

**6. COURSE LEVEL**

<input type="checkbox"/> Management	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Human Resource Management	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Financial Management	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Marketing	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Accounting	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Business Information Systems	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Tourism Management	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400
<input type="checkbox"/> Hotel Management	<input type="checkbox"/> 100	<input type="checkbox"/> 200	<input type="checkbox"/> 300	<input type="checkbox"/> 400

All courses are subject to a minimum 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  
Fees 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 Study	Last Year in College	Reasons for Leaving

**11. STUDY OPTION**

OPTION	DAYS	TIME (tick)	LEVEL	(TICK)
Day	Monday - Friday	8:30 am - 3:30 pm		
Evening	Monday - Friday	5:30 pm - 8:30 pm	300 - 400	
Weekend	Friday	5:30 pm - 8:30 pm	300 - 400	
	Saturday	8:30 am - 6:30 pm	300 - 400	

**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/SHE HAS ALREADY COME INTO THE COLLEGE, HE MAY BE ASKED TO WITHDRAW.

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