



KESBEN UNIVERSITY COLLEGE, KUNTANASEKMUASI

APPLICATION FORM FOR ADMISSION TO **FIRST DEGREE PROGRAMMES** TO BE COMPLETED AND RETURNED TO:

THE REGISTRAR
KESBEN UNIVERSITY COLLEGE–
P. O. BOX 16710, ADUM-KUMASI
Email: registrar@kc.edu.gh or info@kc.edu.gh

INSTRUCTIONS: Please read the instructions below before filling the admission form.

- i. **Cost of Application Form**
 - Application fee of GH¢150.00. Applicants outside Ghana and Non-Ghanaians are required to pay US\$70.00 or its equivalent in International Money Order.
 - Application fee paid is non-refundable.
- ii. **Result slips/Certificates/Transcripts**
 - Certified photocopies of *WASSCE/SSSCE/A'Level/O'Level* result slips and Diploma/Degree/Professional Certificates/Transcripts (for top-up applicants) should be attached to this form.
 - Matured Applicants must attach/add a copy of their proof of birth (preferably, birth certificate) to the admission form.
 - Original result slips, certificates and transcripts must be presented for verification at registration.
- iii. **Photographs**
 - Two recent passport-size photographs should be attached to this form. (One of the photographs should be endorsed).
 - Names should be written on back of the other photograph).
- iv. **Corroborative Declaration:**
 - This portion of the form should be signed by someone of high repute, and who knows the Applicant personally.
 - He/she should endorse one of the Applicant's photographs.

For further inquiries, please ***call/WhatsApp: +233 (0) 501 63 73 83 or Call: +233 (0) 264 17 04 75***



KESSBEN UNIVERSITY COLLEGE, KUNTANASE/KUMASI

APPLICATION FORM FOR ADMISSION TO **FIRST DEGREE PROGRAMMES** TO BE COMPLETED AND RETURNED TO THE REGISTRAR, KESSBEN UNIVERSITY COLLEGE, KUNTANASE - P. O. BOX 16710, ADUM-KUMASI

Affix Passport
Photograph here

470 x 470 pixels

A. PERSONAL DETAILS:

1. Surname:
2. First name:
3. Other Official name(s):
- 4a. Date of Birth:.....
Day Month Year
- 4b. Sex: Male Female
- 5a. Nationality: 5b. Place of Birth:.....
- 6a. Hometown:..... 6b. Region/State.....
- 6c. Are you physically challenged? Yes/No 6d. If Yes, indicate the form of disability:.....

B. ADDRESS

- 7a. GPS (Digital) Address:.....
- 7b.: Postal Address:.....
- 7c. ID Type:..... 7d. ID Number:.....
8. Residential Address:.....
- 9a. Phone No.(s):..... 9b. Email.....

10a. EDUCATION

Senior High School(s)/Senior Secondary School(s) Attended with dates:

Name of School & Location	From	To

10b. Mode of Application (tick):

SSSCE	WASSCE	GBCE	ABCE	HND	Diploma	A'Level	O'Level	Matured	Other (Specify)

11a. EXAMINATION DETAILS

Particulars	1 st Sitting/Attempt	2 nd Sitting/Attempt	3 rd Sitting/Attempt	4 th Sitting/Attempt
Month & Year				
Exam Index No.				
Examination Centre				
Type of Exam/Board				

11b. GRADE DETAILS:

Title of Subjects	Examination Results (Grades) for both Core and Elective Subjects			
	1 st Sitting	2 nd Sitting	3 rd Sitting	4 th Sitting
CORE:				
English				
Mathematics				
Integrated Science				
Social Studies				
ELECTIVES				

NB: Include (attach) certified photocopies of certificates, result slips and other relevant documents

C. PARTICULARS OF PARENT(S)/GUARDIAN(S)/CARETAKER(S)

- 1. Name:.....
- 2. Digital Address:.....
- 3. Occupation:.....
- 4. Tel. No.:..... E-mail:.....
- 5. Relationship to the Applicant:.....

D. CHOICE OF PROGRAMME OF STUDY:

Please refer to the codes listed below and indicate preferences for the Degree Programme(s) for which you wish to be admitted.

01 B.Sc. Business Administration with options in:

- a. Accounting
- b. Banking and Finance
- c. Marketing
- d. Human Resource Management

02. B. Sc. Logistics, Procurement and Supply Chain Management

03. B. Sc. Information and Communication Technology

04. B. A. Media and Communication Studies with options in:

- a) Public Relations and Advertising
- b) Print and Broadcast Journalism

05. B. Sc. Nursing

06. B. Sc. Midwifery

07. B. A. Politics and International Relations

09. B. A. Public Administration and Leadership Studies

10. B. Sc. Computer Science with Entrepreneurship

NB: Indicate programme preference(s) by placing the appropriate code(s) in the boxes provided below:

1st Choice

2nd Choice

3rd Choice

E. PAST AND PRESENT EMPLOYMENT RECORDS (If applicable)

Institution	Position	Date(s)

F. FINANCING OF YOUR UNIVERSITY STUDY (Please tick as appropriate):

1. Student Loan Trust 2. Study Leave 3. Self Financing 4. Other (Specify).....

NB: Kessben University College is not obliged to offer students financial assistance or scholarships to its students.

G. PREVIOUS ATTENDANCE AT A TERTIARY INSTITUTION:

- i. Have you ever enrolled in a tertiary institution? YES [] NO [] if YES answer the following:
- ii. Name of the Institution.....
- iii. Your name on your registration form.....
- iv. Year of Admission..... (v) Hall of Residence (if applicable).....
- v. Course/Programme of study.....
- vi. Last year of study.....
- vii. Reason(s) for leaving the Institution.....

H. PREFERRED STREAM/SESSION: Please, tick your preferred stream/session and campus:

- i. Regular (Full-time) at Kuntanase Main Campus
- ii) Weekend at Kumasi City Campus

I. DECLARATION BY APPLICANT:

I hereby declare that the information provided by me is true and correct, and that I should be denied admission, and/or withdrawn from Kessben University College if the information is found to be false.

- 1. Signature of ApplicantDate
- 2. Name and Address of Corroborator Contact No.:.....
- 3. Signature of Corroborator Date.....

Note: All copies of documents submitted in connection with this application become the property of Kessben University College.

How did you hear of us?(Tick): TV Radio Student/Staff of KC Newspaper MOGPA Other (Specify).....