



## CHRIST APOSTOLIC UNIVERSITY COLLEGE

### APPLICATION FORM FOR SSSCE/WASSCE

PLEASE NOTE: *You are allowed to submit only one set of application form.  
Your Application would not be processed if you fail to do so.  
(Your name must be quoted as it appeared on your result slip[s])*

Affix  
Passport-size  
Photograph  
here

#### A. PERSONAL DETAILS:

1. Surname.....
2. Other Name(s).....
3. Former Name (if applicable).....
4. Nationality.....
5. Home Town.....
6. Date of Birth.....
7. Region.....
8. Religion.....

#### B. ADDRESS

1. Contact Address.....
2. Tel. No..... Fax..... E-mail.....

#### C. PARTICULARS OF PARENTS/GUARDIANS

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

#### D. CHOICE OF PROGRAMME:

	LIST OF PREFERRED PROGRAMME	OPTIONS
1ST		
2ND		
3RD		
4TH		

#### E. SENIOR SECONDARY SCHOOL CERTIFICATE EXAMINATION(SSSCE)/ WEST AFRICA SENIOR SCHOOL CERTIFICATE EXAMINATION (WASSCE)

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

TITLE OF SUBJECTS	EXAMINATION RESULTS (Grades)			
	1st Sitting	2nd Sitting	3rd Sitting	4th Sitting
Core Subjects				
1. English				
2. Mathematics				
3. Integrated Science				
4. Social Science				
5.				
Electives				
1.				
2.				
3.				
4.				
5.				
6.				

NB: Include photocopies of certificates, result slips and other relevant document.

**F. FINANCING OF UNIVERSITY STUDY:**

Source of funding: Tick appropriate box

1. SSNIT Student Loan Scheme ( )      2. Study Leave ( )      3. Self Financing ( )  
 4. Others (Specify).....

**G. PREVIOUS ATTENDANCE AT A UNIVERSITY:**

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

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hereby declare that the information provided by me is true and correct, and that I should be denied admission, and/or withdrawn from the University if the information is found to be false.

1. Signature of Applicant..... Date.....

This declaration should be signed by a person of high integrity and honour who must also endorse at least one of the candidates passport-size photographs on the reverse side and also satisfy himself/herself that the examination grades indicated on the form by the applicant are genuine.

ii) The application will not be valid if the declaration below is not signed.

2. Name and Address of Corroborator.....  
 ..... Tel. No.....  
 3. Signature of Corroborator..... Date.....