



FORESTRY COMMISSION TRAINING CENTRE

P. O. Box 6424, Adum, Ksi | Email: info.fctc@fcghana.org | Digital Add: AE-0026-1328

APPLICATION FOR ADMISSION TO CERTIFICATE PROGRAMME IN NATURAL RESOURCE MANAGEMENT

APPLICANTS TO NOTE

Affix Passport-size Photograph here

- i. Please include photocopies of certificates and other relevant documents.
- ii. Mature applicants should attach a copy of their birth certificate.
- iii. Completed applications should be sent (together with a payment order/bankers draft of **GHC150.00**) via post to the address on page 4 of this form.
- iv. Attach two passport size Photographs on the form.
- v. For details on entry requirements for the programme please visit **www.fctc.fcghana.org** or call **+233 (0) 322 494854 / +233 59 888 2242**
- vi. An Applicant who makes a false statement on the form shall be refused admission, and/or if he/she has already been admitted, shall be withdrawn from this Institution.

SECTION 1 PERSONAL INFORMATION (IN BLOCK LETTER)

- i. Surname:
- ii. First name.....
- iii. Other names:
- iv. Gender: Male [] Female []
- v. Nationality.....
- vi. Date of Birth.....
- vii. Religion.....
- viii. Hometown.....
- ix. Region.....
- x. Postal Address.....
- xi. Email Address.....
- xii. Phone Number(s).

PARTICULARS OF PARENTS/GUARDIANS

- i. Name:
- ii. Relationship:
- iii. Occupation:
- iv. Phone Number:
- v. Email Address:
- vi. Address:.....
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SECTION 2 ACADEMIC RECORD

2a. Type of Application (please tick where applicable)

SHS Mature

2b. Examination Details (Type of Examination: SSCE, WASSCE, A 'Level, HND)

No:	Name of Institution	Type of Exam	Index Number	Year of Exam	Exam Centre
1					
2					
3					
4					
5					

2c. Examination Grades

Subjects		Grades		
		1 st Sitting	2 nd Sitting	3 rd Sitting
CORE				
1				
2				
3				
4				
5				
6				
ELECTIVES				
1				
2				
3				
4				
5				
6				
7				
8				
9				

2d. Details of other qualification (e.g. HND, Diploma, etc)

Qualification	From (Month/Year	To (Month/Year)

2e. Previous Colleges/ Institution Attended

Name of Institution	Year of Entry	Course/Programme	Last Year Study	Reason for leaving

2f. Any Work Experience/ Employment History

Employer's Name	Years of Experience	Job Title

SECTION 3 SOURCE OF FUNDING

Please indicate source of funding

Personal:

Study Leave: | |

Sponsorship/ Scholarship

(Evidence of sponsorship)

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Section 4 LANGUAGE REQUIREMENTS

Is English your official language Yes No

If English is not your official language, provide details of English qualification and test score.

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Section 5 ADDITIONAL INFORMATION

How did you get to know about the Forestry Commission Training Centre (FCTC) Certificate Programme in Natural Resource Management? Please tick all that apply.

Newspapers

Radio Advert

Internet

Poster/Flier/Banner

Friend/Relative (Please state the Name if he/she is a Forestry Commission Staff/ Student of UENR)

Forestry Office

Test Message from FCTC

Phone Call from FCTC

SHS Visitation by Staff

Education Fair

Other, please Specify

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Section 6 DECLARATION

I hereby acknowledge that the information provided is true and correct.

Date:/...../20.....

Applicant's Signature:

Please complete this form and return to the address below, together with a payment order of **GH¢150.00** from any local bank of your choice.

The Director
Forestry Commission Training Centre
P. O. Box 6424, Adum, Kumasi

