

GHANA TELECOM UNIVERSITY COLLEGE (GTUC)



CENTRE FOR PROFESSIONAL DEVELOPMENT

**POST GRADUATE CERTIFICATE IN PRACTICAL
ACCOUNTANCY AND TAXATION**

APPLICATION FORM

IMPORTANT: CANDIDATES ARE REQUESTED TO SEND THE COMPLETED FORM TO:

The Centre for Professional Development
GTUC
Private Mail Bag – Tesano
Accra Ghana
Phone: 021-200606, 021-200615, 021-936212
Email: cpd@gtuc.edu.gh

Please provide all of the following Information. Incomplete applications will not be accepted.

- I. Certified True Copies of certificates and any other academic records.
- II. Three stamped self-addressed foolscap envelopes
- III. Three recent passport size photographs one of which should be affixed to the form.

Personal Data

1. Full Name:
 2. Date of Birth:
 3. Place of Birth:
 4. Nationality:
 5. Marital Status:
 6. Current Address:
.....
- Telephone:
- E-mail:

7. Record of Employment: (Starting with Present Employment)

No.	EMPLOYER	POSITION IN EMPLOYMENT	DATE	
			From	To
1				
2				
3				
Total Number of Years Worked				

8. Academic Qualifications.

(Kindly complete this session starting with the most recent qualification up to undergraduate qualification)

S/No	Name of Institution	Date	Degree/ Certificate Awarded/ Yet to be Awarded

9. Programme Choice and Study option: *(Kindly indicate the programme and the study option you wish to pursue)*

#	PROGRAMME	Evening School	Weekend School
1	Post-Graduate Certificate in Accountancy		
2	Post-Graduate Certificate in Taxation		
3	Post-Graduate Certificate in Accountancy and Taxation		

Evening School (Monday – Friday, 6:00pm – 9:00 pm)

Weekend School (Friday, 6:00pm – 9:00pm; Saturday 8:00am – 5:00 pm)

Online School (Weekly Lectures and assignments posted online)

10. Sponsorship (Tick as appropriate)

a) Employer ()

b) Self ()

c) Other (please specify):

11. Other achievements, awards, honors, special recognition

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12. DECLARATION

I hereby acknowledge that the information submitted is true and correct. I grant GTUC permission to forward any pertinent information to authorized offices and agencies. I agree to respect the traditions and rules of GTUC

Date: Applicant’s Signature

PAYMENT OF APPLICATION FEE

FOR OFFICIAL USE ONLY	
Application Fee: GHC	
Received and Acknowledged:	Date: