



UNIVERSITY COLLEGE OF MANAGEMENT STUDIES

ADMISSION TO THE BACHELOR'S DEGREE
PROGRAMMES

APPLICANT INFORMATION FORM

Affix Your
Passport
Picture
Here

IMPORTANT : Answer all questions on the form or indicate N/A if not applicable. All information will be kept confidential and used only in determining your eligibility for the program. Candidates are required to send completed forms with the following enclosure :

- (i) Certified photocopies of result slips or certificates
- (ii) Three recent passport-sized photographs (One of the photographs should be endorsed)

Form No.:ADM

1.0 Personal Information

- 1.1. Surname..... First Name.
Other Name..... 1.2. Gender (Male/Female)
- 1.3. Address
- 1.4. Telephone No..... 1.5. Mobile No. (*very essential*).....
- 1.6. Fax No.:..... 1.7. E-mail Address
- 1.8. Date of Birth// 1.9. Age 1.10. Place of Birth..... 1.11. District
- 1.12. Region..... 1.13. Nationality..... 1.14. Religion
- 1.15. Permanent Home Address
- 1.16. Mobile No.:..... 1.17. Tel.
- 1.18. Name and Address of Parent Guardian Sponsor
.....
- 1.19. Mobile No.: 1.20. Home Tel. No.
- 1.21. Office Tel. No. 1.22. Fax No./E-mail
- 1.23. Occupation of Parent Guardian Sponsor
- 1.24. Are you physically disabled or do you suffer any form of handicap? (Yes /No).....
- 1.25. If yes, Specify

2.0 Educational History

2.1. Have you previously applied for a Course or have been enrolled at Institute of Management Studies now University College of Management Studies before? Yes/No.....

2.2. If "Yes" Course Name

2.3. Last Year of Study (if known)

2.4. Please indicate below the highest level of Secondary Schooling and Post-Secondary qualifications you have attempted or completed. please attach certified copies of any educational claims to your application

2.4.1. SSSCE/WASSCE Results

Subject	FIRST SITTING	SECOND SITTING	THIRD SITTING
	<i>Index No.:</i> <i>Year:</i>	<i>Index No.:</i> <i>Year:</i>	<i>Index No.:</i> <i>Year:</i>
	Grades	Grades	Grades
Core: 1. English 2. Mathematics 3. Core Science 4. Social Studies Electives: 1. 2. 3. 4.			

2.4.2. GCE "O" & "A" Level, RSA II & III, DBS, LCCIEB-EDI, GBCE, ABCE Results etc.

Exam Sat	Subject (s)	FIRST SITTING	SECOND SITTING	THIRD SITTING
		<i>Index No.:</i> <i>Year:</i>	<i>Index No.:</i> <i>Year:</i>	<i>Index No.:</i> <i>Year:</i>
		Grades / Result	Grades / Result	Grades / Result

2.4.3. Professional Qualifications obtained if any i.e. ACCA, ACMA, Ca (Gh.), ACIM, MCIM, MCIPS, etc.

Exam Sat	Subject(s)	Grades / Result

3.0 Employment Experience

Please provide details of the following : (attach a separate sheet if the space below is insufficient)

3.1. Details of Workshops, Seminars, Conferences attended, Presentations, Membership of Professional Societies.

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3.2. Employment Details (if applicable)

Establishments	Positions Held	Year From	Year To	Duration of Employment	Full time/ Part-time	Paid Staff / Voluntary

4.0 Programme of Study

4.1. Programme of Choice (indicate order of preference by placing 1,2 etc. In the appropriate box) with choice of campus :

A. DEGREE PROGRAMMES

- | | | |
|--|--|--|
| <input type="checkbox"/> B.Sc. Accounting | <input type="checkbox"/> B.A Leadership & Governance | <input type="checkbox"/> B.Sc Travel & Tour Management |
| <input type="checkbox"/> B.Sc. Banking & Finance | <input type="checkbox"/> B.Sc. Procurement & Supply Chain Management | <input type="checkbox"/> B.Sc Events Management |
| <input type="checkbox"/> B.Sc. Human Resource Management | <input type="checkbox"/> B.Sc. Actuarial Science | <input type="checkbox"/> B.Sc Hotel Management |
| <input type="checkbox"/> B.Sc. Marketing | | <input type="checkbox"/> B.Sc Food & Beverage Management |
| <input type="checkbox"/> B.A Early Childhood Education | | |

B. CHOICE OF CAMPUS: ACCRA KUMASI

NOTE: Final selection of a preferred Degree shall be done at the Level 200 Second Semester before entering Level 300 Course of Study. Every Programme shall have not less than Twenty (20) Students or else you will be required to select a second option with an appropriate study Session.

4.2. Indicate Study Session preferred:

Morning Session Evening Session Weekend Session

4.3. When do you want to enter the University College? (Eg. 2013, 2014, or 2015, etc - kindly state your preferred year of Admission)

September / October 20..... January / February 20.....

5.0 Payment of Fees

5.1. Fee Payment: Who is going to be responsible for the payment of your Fees? (Eg. Parents, Employer or Self)

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5.2. Sponsor's Attestation: I/We hereby certify that I/we will be responsible for the payment of my/our Ward's/Employment Fees without hindrance to the completion of his / her course of study. If Self, please ignore columns 5.3 - 5.13

5.3. Name of Parent / Guardian.....

5.4. Address 5.5. E-mail.....

5.6. Signature 5.7. Mobile No.

5.8. If Sponsored by a Company / Establishment etc.

5.9. Name of Authorising Officer

5.10. Position 5.11. Address

..... 5.12. Tel./Mobile 5.13. Signature

6.0 Supplementary Information

6.1. How did you learn about University College of Management Studies? (Eg. The Newspaper, Parents, Friends, etc.....)

6.2. English Language Proficiency: Francophone Students

All Francophone Students to indicate their fluency for SPEAKING, READING, WRITING and LISTENING in English using the following scale: 1 = Very Good, 2 = Good, 3 = Fair

Speaking	Reading	Writing	Listening

6.3. To be completed by all Applicants

Rate your computer access and abilities below, as far as your skill is concerned.(Please Tick)

Computer Area Studied		Good Knowledge	Fair Knowledge	No Knowledge
Access to Information Technology and the Internet				
Basic Computer Skills	Ms-Word			
	Ms-Excel			
	Ms-Power Point			
Navigating the Internet				
Use of Email Facilities				
Use of Word Processing Packages				

7.0 Declaration

7.1. All Applicants MUST sign the declaration.

I declare that to the best of my knowledge, the information given in this application is correct and complete. I understand that the University College reserves the right to vary or reverse any decision made on the basis of incorrect, or incomplete information given by me. I further authorise the University College to obtain official records from any educational authority holding such records on me. If accepted, I agree to abide by the policies and procedures in the University College of Management Studies and will attend class lectures regularly and subject myself to all assignments and tests. I further acknowledge that once Tuition Fees has been paid **No refund is effected when class lectures have started and that no partial refund can be given for any classes not attended. However, if no class lectures have begun, you shall be entitled to 80% refund of Fees paid.**

The University College cannot accept responsibility for unforeseen changes in a student’s circumstances that may prevent attendance. In the vent of discontinuing the course of study **I am bound to give a Semester’s notice in writing or else the University has the right to claim a Semester’s Fee in lieu of notice from me.**

7.2. Signature of Applicant 7.3. Date

7.4. If applicant is under 18 years of age, Parent or Guardian’s Consent.

7.5. Name 7.6. Signature

8.0 Recommendation

To the Individual Completing this Form:

The University College of Management Studies selection committee would appreciate your answering the questions below in specific and candid manner, noting in particular incidents that illustrate the Student's maturity, initiative, and academic potential to succeed in College. You should have known the Applicant for not less than 3 years period.

- 8.1. Your Name
- 8.2. Position 8.3. Establishment
- 8.4. Address8.5. E-mail.....
- 8.6. Telephone No. 8.7. Mobile No. (very essential).....
- 8.8. How long have you known the Applicant Years Months. Under the circumstances the referee cannot be a relative or a friend. **Any comments.**
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- 8.9. Date 8.10. Signature

9.0 Submission of Completed Form

9.1. Forward Completed Form to:

(A) The Admissions Office

University College of Management Studies
P. O. Box GP. 482, Accra.

Tel.: 0302 971 531

Cell: 0576 66 11 99 | 0575 66 11 99

Location: SCC Junction, opposite
New Jerusalem Taxi rank.

📍 GPS GS-0166-6581

(B) The Admissions Office

University College of Management Studies
P. O. Box UP.12, Kumasi.

Tel.: 032 249 1179

Cell: 0572 66 11 99 / 0573 66 11 99

Location: Ayeduase Town - New Site
which is within the environs of KNUST
after Paa Joe Stadium. Taxis are
available at the KNUST junction to
UCOMS Campus.

📍 GPS AK-626-8951