## UNIVERSITY OF CAPE COAST - GHANA

## **APPLICATION FORM**

## POSITION OF PRO VICE-CHANCELLOR

This Application Form (when fully completed) should be forwarded (with four copies) together with three Passport Photographs to: The Registrar, University Of Cape Coast, Cape Coast, Ghana.

Application for Appointment as (please indicate Post/ Rank)							
Department:							
1) Personal Particulars - Surname (Block Letters): Prof./ Dr./ Rev./ Mr./ Mrs./ Ms.  Other Names:							
	Other Names:						
Present Address:							
Age:			rth:				
Email:							
Tel.:							
Place of Birth		Home To	wn				
Region :							
Religion (if any)							
If naturalized citizen, give <u>number</u> & <u>date</u> of Certificate and <u>Name</u> in which it was granted:							
Married // Single							
If married, full name of Husband / Wife							
Children (Names, Dates of Birth & Ages)			Date of Birth	<u>Age</u>			
1							
2							
3							
4							
5							
Passport Number(s) held by Yourself, Wife/ Husband and each Child, with Date(s) and Place(s) of Issue and Date(s) of Expiry:							
1							
2							
3							
4							
5							
(2) Education							
(2) Education (a) School(s) attended – Secondary / Con	nmercial / Ted	chnical					
Secondary / Commercial / Technical	nte	Programmes / Subjects Studied					
Occordary / Commercial / Technical	From	То	Trogrammes / Gabje				

(b) University or Other Similar Inst	itution attende	d				
University / Similar Institution		Date From To			Programmes / Subjects Studied	
·	Fro	m	То			·
(c) Qualifications with detailed Part	iculars: When a	& Wher	e obtained;			
Cartificatos Awardad	Year		10	here Obta	inad	Details of Examinations Results
		btained where Ob			ilitea	(Class, Distinctions, etc.)
(3) Record of Employment						
[i] Present Employment - Present Sa	alarv				Salary Scal	9
[i] Tresent Employment - Tresent Oc			Date of	·····		
Institution and Address		Assumption			Position held, Work involved, and Subject taught if relevant	
			•		•	<u> </u>
Name of Head of Dept./Institution:						
Address:						
[ii] Previous Employment(s)						
3 - 3			Da	te		
Institution			From	То	Position	Held / Reasons for Leaving
			-			
		1				

. (a	i) D	etails of Teaching / Research / Professional, relevant to the Post being applied for:						
(b	) F	Publications:						
5)	GE	ENERAL:						
ć	a)	Have you any objections to reference being made to any of the employers named by you (including your present employer)?						
ļ	b)	Have you any form of Physical Disability? Give brief details.						
(	C)	Have you ever been convicted in a Court? If yes, give brief particulars of the offence.						
	d)	Are you bonded to serve in any other capacity? If so give details.						
	-\	What are many habita and mark times 2						
	e)	What are your hobbies and past-times?						
5)	lf A	ppointed, how soon after notification could you assume appointment?						
7) <u>1</u>	Nan	nes and Addresses of Three Referees (At least one should be a person under whom you have studied, another under whom you have worked. Names of relatives are not accepted.)						
[1]	Nar	me:						
		cupation:						
	Ado	dress:						
	Tel	E-mail:						
	Cor	nnection with Applicant:						

[2]	Occupation:	
	Tel:	E-mail:
	Connection with Applicant:	
[3	Name:	
	Occupation:	
	Address:	
	Tel:	E-mail:
	**	
(8)	<u>DECLARATION</u> :	
	I certify that the information given on this Form is correct. disqualification or instant dismissal if engaged.	I understand that any willful misstatement renders me liable to
		Date
	Signature of Applicant	Dato