



SUCCESS SKILL PROFESSIONAL TRAINING CENTRE

The Practical School

AFFIX PASSPORT
SIZE PICTURE

ADMISSION PACKET



Name of Candidate: _____

Index Number: _____

Course Enrolled: _____

Professional Training Programs
We Offer Purely Workable and Employable Programs



Application For Admission

A. Candidate Personal Information

Candidate's Name: _____
Family/Last Name *First Name* *Middle*

Date of Birth: / / Birth Place: _____ Gender:
Day *Month* *Year* *M/F*

Starting Date: / /
Day *Month* *Year*

Nationality on Passport/Birth/Driver's/Voter's ID _____

Postal Address: _____

Residential Address: _____

B. Family Information

Name of Parent/Guardian: _____ Profession _____

Email: _____

Nationality: _____ Tel: _____

C. Choosing Course

Course Module Category: _____

Course Title: _____

Course Code: _____

D. Educational Background

Elementary, Secondary, Undergraduate and Postgraduate Qualification(s). From To Name of Institution & Location
Subjects & Grades Qualifications

09/94 07/96	Name of School	City/Town	Visual Art (Grade 36)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



Application For Admission

E. Professional Qualifications

09/94 07/96	Name of School	City/Town	Visual Art (Grade 36)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please include official transcripts of your studies, detailing subjects studied and grades achieved together with a translation into English if appropriate, or indicate if you have arranged for them to be sent directly to SUCCESS Skill Professional Training Centre.

F. Language Skills

What is your first language? _____

How often do you use English in a business context?

Daily Weekly Rarely Never

How often do you use English in a study context?

Daily Weekly Rarely Never

Competence in reading, speaking and writing in English is essential if you are to get the most from Skill Professional Training Centre. We ask that you demonstrate competence in English by one of the following criteria. Please indicate which:

- English is your native language
- You have graduated with a degree from an English-speaking university
- You have worked in an English-speaking environment for at least two years

If English is not your native language, please outline your experience of working or studying in an English-speaking environment and indicate if, when and where you plan to take further English language training before starting the course.

Please list languages you can use, apart from English, indicating whether your ability is basic, competent or fluent in each:

Language	Level of competence		
_____	basic	competent	fluent
_____	basic	competent	fluent
_____	basic	competent	fluent
_____	basic	competent	fluent
_____	basic	competent	fluent

G. Employment (include a current CV or Resume)

(a) About your Current Employment

Job Title/Position Held _____ Date Employment Started _____
 Department _____ Total Experience on Current Job _____
 Name of Organisation _____ Starting Salary (Annual) _____
 Address _____ Current Salary (Annual) _____

(b) About your Previous Employment (if any)

Particulars of Past Employment (indicate job title, position held, name of organisation, date and address in that order)



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H. Choosing Success Skill Professional Training Centre

How did you find information about Skill Professional Training Centre?

Former or current Skill Professional student _____

- Web site: _____
- Colleagues/employer _____
- Press advertisement _____
- Other (Please specify) _____

I. Who to contact in an emergency

Please provide a phone number, email address, or other contact details so we are able to get in touch with you or your family in a time of emergency:

Name: _____ Tel: _____

Email: _____

Residential Address: _____

J. Checklist

Please staple your recent passport-sized photograph to your application form. All applicants will be treated on equal grounds irrespective of sex, gender, religion, ethnicity, marital status or physical ability.

Please tick when you have enclosed:

- one application form with a copy of your CV.
- stapled passport photograph on your application form
- application fee receipt or an amount of **GH¢40.00**; Payment of downloaded form can be paid cash at the office or can pay by mobile money in to the contact number 0243049341..
- Original academic transcripts and certified true copy of Certificate(s)

Your application cannot be processed until we have received all of these items.

J. Declaration

I sign to confirm that the details I have given in this application are correct, that I have included all the documents required and that I apply for admission to the SKILL Professional Training Centre.

Signature _____ Date _____

Centre's Advertisement

Student pictures may be used for the centre's advertisement and other training centre's publications such as newsletters, website, centre's magazine, brochures, TV commercials, etc. Students of Success Skill Professional Training Centre (SSPTC) may also participate in centre competitions and other "outside" centre campus activities that will enhance their intellectual, social and ethical grounding.



Location Address

H/No.
Yellow Signboard
Michel Camp Road
Tema, Ghana

Mailing Address

P. O. Box TV 600
Tema - Newtown,
Accra, Ghana
Tel: +233 303 317234
+233 501 524697
Email: info@artisansghana.org
Web: www.artisansghana.org

The Practical School