KAIPTC/Masters Course	(For official use only)	
APPLICANT'S NAME		Photograph
(Surname first e.g. Mensah, Kofi)		
INTENDED COURSE OF STUDY		

KOFI ANNAN INTERNATIONAL PEACEKEEPING TRAINING CENTRE (KAIPTC)



FACULTY OF ACADEMIC AFFAIRS

Application Form for

KAIPTC POST GRADUATE COURSES

1. General Information

a.	Personal Details:	
	Title: Mr. /Mrs. Etc	Date of Birth (ddmmyy)
	Family Name	Country of Residence
Given Name(s)		Country of Birth
	Sex: Male Female	Nationality
b.	Contact Information	
	Address for Correspondence	Telephone Number
		Mobile (Cellular) Number
	E-mail	Country
2.	Academic/Professional Qualifications	
F	From To Name of Institution & Location	Subjects & Grades Qualifications
1		
2		
3		
4.		

Please include official transcripts and certified copies of your certificates, 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 the Registrar, KAIPTC.

3. 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 the KAIPTC Masters course. We ask that you demonstrate competence in English by one of the following criteria. Please indicate which:			
English is your native langua	ge		
You have graduated with a c	degree from an English-speaking university		
You have worked in an Engli	sh-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 KAIPTC Masters 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		
	basiccompetentfluent		

Please take note that the Masters Programme is delivered in only English thus the ability to read and write English to an average level of competence is a key requirement for admission.

4.	• EMPLOYMENT (include a current CV or Resume)		
(a)	Current Employment		
	Name of Organisation		
			
	Job Title/Position Held	Date Employment Started	
	Department	Total Experience on Current Job	
	Address		
		_ Country	
(b)	Previous Employment (if any) Particulars of Past Employment (indicate job t	itle/position held, and name of organization,	
	date and address in that order)		
5.	Essa y s		
	Essay 1 Why you want to join the KAIPTC Master's C Your essay should cover the following:	Course.	

- (a) Explain your principal reasons for wishing to join the KAIPTC Masters Course.
 (b) Describe your career aspirations in the next decade.
 (c) Describe the contribution you will make to the programme when admitted.
 (d) State if you will be sponsored and indicate the value you will add to your sponsoring organization.

Essay 2

"Describe one Accomplishment That Occurred in the Last Five Years of Which You Are Most Proud and Why"

Essays should be a maximum of 1000 words each, typed and be on separate sheets.

Which of the for KAIPTC Maste	ollowing sources of finalers course.	nce do you propose	e to use in funding your
☐ Self-funding ☐ Self-funding with Bank Loan ☐ Self funding with employer contributions			
Employer Sponsorship Scholarship Other (please specify)			
7. Referees			
your profess	ional skills. If you have	left further or high	of your intellectual ability and/or er education within the last five and one employment-related
	First Referee		Second Referee
Name			
Position			
Relationship to you Address			
Telephone Number			
Email Address			
Referees are to fill a	attached confidential re	eference forms an	d put in a sealed envelope.
8. Person to contac	ct in case of Emergenc	у	
Family Name		Given Name(s) _	
Relationship to you		Contact	

6. Funding

Checklist
All applicants will be treated on equal grounds irrespective of sex, gender, religion, ethnicity, marital status or physical ability. All documents in a language other than English must be officially translated to English and submitted with the translations.
Please tick when you have enclosed:
One application form and CV
Original transcripts and certified copies of all certificates
Three recent passport-sized photographs (stapled to the caver page of application form)
One stamped self-addressed envelope
Sponsorship statement form (for sponsored applicants)
☐ Application form receipt of GH \$\phi\$100.00. Payment for the Application formshould be made at the
United Bank for Africa (UBA) A/C no 01314305001503 at any of their branches in
Ghana.
(Foreign students are to pay USD\$50.00 for the application form through bank transfer, e-mail Academic Registry for transfer details)
Your application cannot be processed until we have received all of these documents.

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 KAIPTC Post Graduate course.

Signature _____ Date ____

Please contact the KAIPTC Academic Affairs office if you have any queries or comments about this form on Telephone: 0302-718200 Ext 1105 or 1165; +233(0)206752054; +233(0)244847394; +233(0)501209332

KAIPTC MA Applicants, KAIPTC Faculty of Academic Affairs and Research PMB CT 210, Cantonments, Accra.

Email: <u>Fuseini.SandaMusah@kaiptc.org</u>; <u>Margaret.Sosuh@kaiptc.org</u> Website: www.kaiptc.org

First Referee

1.

KOFI ANNAN INTERNATIONAL PEACEKEEPING TRAINING CENTRE (KAIPTC) FACULTY OF ACADEMIC AFFAIRS

l. Th	This section is to be completed by the a After filling out this section, please give	pplicant. this CONFIDENTIAL Form to your Referee to complete
A	Applicant's Name	
A	Applicant's Address	
Ci	City/Country	Programme of Study
D	Date of Birth	
Te	Telephone Number:	Fax Number
E-	E-mail:	
l ł	hereby authorize the appropriate person	on to provide the information requested in this document.
Appli	licant's Signature:	Date:
KAIP	section is to be completed by the Refe PTCwould appreciate your assessment of the evaluation of the participant's admission	the applicant's qualities. The Centre will use your appraisal only
Pleas	ase complete this form as soon as possible	KAIPTC Academic Affairs PMB CT 210 Cantonments Tel.: +233(0)302718200-2 Ext. 1105 or 1165 Fax: +233 (0)302 718 201
Ge	eneral Rating	Website: <u>www.kaiptc.org</u>
		pplicant in the context in which you know him or her: Your ach case by ticking of the appropriate check box:
1.1	In your view, how does the applica	ant rate on the following personal characteristics:
	Motivation Very High () High () Above Average () A	Average()Below Average()Low()Very Low()Not Known()
	Self Discipline Very High () High () Above Average () A	Average () Below Average () Low () Very Low () Not Known ()
	Leadership Very High () High () Above Average () A	Average () Below Average () Low () Very Low () Not Known ()

	erage () Average () Below Average () Low () Very Low () Not Known (
Maturity Very High () High () Above Average	() Average () Below Average () Low () Very Low () Not Known ()
Academic Ability Very High () High () Above Average (() Average () Below Average () Low () Very Low () Not Known ()
1.2 Please indicate how well the ap	plicant is known to you:
Known only through Records [1.3 Please indicate how long you h] Seen Occasionally [] Known Personally [] ave known the applicant:
Less than 1 year [] 1-3 years [1.4 The applicant has been known Student [] Subordinate [] Colleag	to you as a:
2. Specific Comments	
2.1 What do you see as the personal	strengths of the applicant?
2.2 In your view, what weakness mig	ght the applicant show?
2.3 KAIPTC would appreciate your o	verall assessment of the applicant's academic capabilities:
 II. The Referee:	
Referee's Name	
Organization	
Position	
Address	
Region/City / Country	
Contact Phone Number:	Fax Number:
Referee's Signature	Date:
 E-mail	

Second Referee

II.

1.

KOFI ANNAN INTERNATIONAL PEACEKEEPING TRAINING CENTRE (KAIPTC) FACULTY OF ACADEMIC AFFAIRS

I. Th	his section is to be completed by the After filling out this section, please	the applicant. give this CONFIDENTIAL Form to your Referee to complete
Ap	oplicant's Name	
Ap	oplicant's Address	
Ci	ty/Country	Programme of Study
Da	ate of Birth	
Те	elephone Number:	Fax Number
E-	mail:	
Ιh	nereby authorize the appropriate	person to provide the information requested in this document.
— Applio	cant's Signature:	Date:
KAIP	section is to be completed by the TCwould appreciate your assessme evaluation of the participant's admis	Referee: ent of the applicant's qualities. The Centre will use your appraisal only ssion and its confidentiality will be safeguarded.
Pleas	se complete this form as soon as pos	sible and return to: The Assistant Registrar KAIPTC Academic Affairs PMB CT 210 Cantonments
		Tel.: +233(0)302718200-2 Ext. 1105 or 1165 Fax: +233 (0)302 718 201 Website: <u>www.kaiptc.org</u>
Ge	neral Rating	
		this applicant in the context in which you know him or her: Your I in each case by ticking of the appropriate check box:
1.1	In your view, how does the ap	oplicant rate on the following personal characteristics:
	Motivation Very High () High () Above Averag	e () Average () Below Average () Low () Very Low () Not Known ()
	Self Discipline Very High () High () Above Averag	e()Average()BelowAverage()Low()VeryLow()NotKnown()
	Leadership Very High () High () Above Averag	e()Average()BelowAverage()Low()VeryLow()NotKnown()
		e()Average()BelowAverage()Low()VeryLow()NotKnown()
	Maturity Very High () High () Above Avera	ge () Average () Below Average () Low () Very Low () Not Known (

	Academic Ability Very High () High () Above Average () Average () Below Average () Low () Very L	Low () Not Known ()
	1.2 Please indicate how well the applicant is known to you:	
	Known only through Records [] Seen Occasionally [] Known Personally [] 1.3 Please indicate how long you have known the applicant:]
	Less than 1 year [] 1-3 years [] More than 3 years []	
	1.4 The applicant has been known to you as a: Student[] Subordinate[] Colleague[] Friend[] Acquaintance[]	
:	2. Specific Comments	
	2.1 What do you see as the personal strengths of the applicant?	
	2.2 In your view, what weakness might the applicant show?	
	2.3 KAIPTC would appreciate your overall assessment of the applicant's academ	ic capabilities:
 III.	The Referee:	
	Referee's Name	
	Organization	
	Position	
	Address	
	Region/City / Country	
	Contact Phone Number:	Fax Number:
	Referee's Signature	Date:
 E-m		