



CUNNINGHAM UNIVERSITY COLLEGE, GHANA (CUCGH) EAST LEGON, ACCRA-GHANA/ WEST AFRICA

ADMISSION APPLICATION FORM

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PERSONAL INFORMATIO	SONAL INFORMATION DATE					
FULL NAME (AS ON PASSPORT/II)):		DATE OF BIRTH:			
GENDER: Male Female	☐ Other	NATIONALITY:				
EMAIL:		PHONE NUMBER:				
POSTAL ADDRESS:	CITY/TO\	VN:	COUNTRY:			
EDUCATIONAL BACKGRO	DUND		,			
FIELD:		INPUT TYPE				
HIGHEST QUALIFICATION						
NAME OF INSTITUTION						
YEAR COMPLETED						
UPLOAD ACADEMIC TRANSCRIPT	C/CERTIFICAT	E				
PARTNER INSTITUTION SELECT THE INSTITUTION YOU W	ISH TO APPL	Y TO:				
☐ De Montfort University (DMU,	Dubai)					
☐ Curtin University						
☐ Global College of Malta						
☐ DEMONT Institute of Management and Technology						
☐ Middlesex University Dubai						
☐ Steinbeis University – Schools	of Next Pract	ices				
☐ ISB Dubai						
☐ European Institute of Manage	ment and Tec	hnology (EIMT)				
☐ ASTI Academy						

LEVEL OF INTEREST CERTIFICATE UNDERGRADUATE FOUNDATION **POSTGRADUATE DIPLOMA DOCTORATE INTAKE PREFERENCE** FIELD: **INPUT TYPE** PREFERRED INTAKE MONTH JANUARY / MARCH / JULY / SEPTEMBER YEAR 2025 / 2026 STUDY MODE (ONLINE / ON-CAMPUS / HYBRID) ATTACHMENTS (Tick to Confirm Submission) ☐ A copy of Valid National ID or Passport ☐ Academic Certificates/Transcripts ☐ One (1) Passport-sized Photograph ☐ Updated CV/Resume ☐ Bank Statement/Proof of Fee Payment (if applicable)

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l,	HEREBY DECLARE THAT THE INFORMATION PROVIDED ABOVE IS ACCURATE
AND TRUTHFUL. I UNDERSTAND THAT FALSII	FYING DOCUMENTS OR PROVIDING MISLEADING
INFORMATION MAY LEAD TO DISQUALIFICAT	TION OR DISMISSAL.

SIGNATURE:	DATE:	1	1