GAFCSC/Master's Course (For office use only)	
APPLICANT'S NAME	
(Surnam	e first e.g. Anderson, Kwame)

**Photograph** 

## GHANA ARMED FORCES COMMAND AND STAFF COLLEGE (GAFCSC)



## **ACADEMIC DIVISION**

## Application Form for

MASTER OF SCIENCE IN
DEFENCE AND INTERNATIONAL
POLITICS (MDIP)

1.	General Information		
a)	Proposed Entry Date (mm/yyyy)		
b)	About You:		
	Title: Mr. /Mrs. etc	Date of Birth (dd/mm/y	yyyy)
	Surname Name	Country of Residence _	
	Other Name(s)	Country of Birth	
	Sex: MaleFemale	Nationality	
	Rank*		
	Date of Commission/ Passing Out *		
	Current Unit*		
c)	Contact Information  Address for Correspondence	Telephone Number	
	Country	Mobile number	
	Email Address	Fax Number	
2.	Academic/Professional Qualifications		
	rom To Name of Institution & Location	Course &Subject	Qualifications
•	mple) 04 07/08 Example School, Someplace	Business Admin (Finance)	BSc Admin (1st Class)
<b>a</b> )			
<b>b</b> ) —			
c)			

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 direct to the Registrar, GAFCSC.

<sup>\*</sup> Indicate Not Applicable if this does not apply to you

3. Language Skills	
What is your first language?	
How often do you use English in a bus	iness context? <u>daily</u> weekly rarely never
How often do you use English in a stud	ly context?daily_weekly_rarely_never
	writing in English is essential if you are to get the most ask that you demonstrate competence in English by dicate which:
English is your native language	
You have graduated with a degr	ree from an English-speaking University
	-speaking environment for at least two years
competent or fluent in each:  Language	Level of competence
	basiccompetentfluent
4. EMPLOYMENT (include a curr	rent CV or Resume)
(a) About your Current Employme	nt
Job Title/Position Held	Date Employment Started

Department\_\_\_\_\_

Name of Organization

Address\_\_\_\_\_

Country

## May we Contact you at Work?

Total Experience on Current Job\_\_\_\_\_

applying to the GAFCSC MSc DIP?\_\_\_\_\_

Does your Employer know you are

<b>(b)</b>	About your Previous Employment (if any)		
	Particulars of Past Employment (indicate job title, position held, and name of organization, date and address in that order)		
_			
_			
5.	About Research Experience		
	Give a brief outline of Research undertaken. ( <i>Please Type on a Separate Sheet of Paper and include the following details for each one</i> ).		
	Your Name, Title of Research, Description and Duration		
6.	Why you want to join the GAFCSC Master's Course. Your answer should be an essay (to be attached) to cover the following:		
(a)	Explain your principal reasons for wishing to join the GAFCSC 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.		
7.	Funding.		
	Which of the following sources of finance do you propose to use in funding your GAFCSC Masters course.		
	Self-funding with bank loan		
	Self funding with Employer contribution Employer sponsorship		
	Scholarship Other, (please specify)		
8.	Essay		
	Please use a separate sheet of paper to write about the following topic, taking no more than 1,000 words.		
	"Describe one Accomplishment that occurred in the Last Five Years of Which You Are Most Proud and Why"		

9.	Choosing an	MSc Programme		
	(a) Please list, in order of preference and including GAFCSC, the institutions to which you have			
	made an application for an MSc Programme.			
	1		2	
	3		4	
	(b) How did y	ou find information about the C	SAFCSC MSc I	Programme?
	Web sit	e:		
	Colleag	gues/employer		
	Press a	dvertisement		
	Other (Please specify)			
	your profess five years, y reference. <b>Re</b> Each referee	ional skills. If you have left ou should offer one acader ferences from personal friend should complete one reference e confidentiality, and then re	further or high nic reference <b>Is or relatives</b> form, seal it in	an envelope, sign across the before you submit your
		First Referee		Second Referee
Name				
Positio	n			
Relatio	onship to you			
Addres	SS			

9.

Telephone Number

**Email Address** 

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:		
two (2) completed application form with a copy of your essays and CV.		
two (2) copies of relevant certificates authenticated by the awarding institution.		
one (1) original copy of transcript of academic records		
two (2) recent passport size photographs attached to forms.		
two (2) references sealed in their envelopes		
one (1) stamped self-addressed envelope		
sponsorship statement form (for sponsored applicants)		
_application fee receipt of GHC 100.00 (Payment should be made with the following		
account detail:		
BANKERS: UNITED BANK FOR AFRICA (UBA)		
ACCOUNT NAME: GHANA ARMED FORCES COMMAND AND STAFF COLLEGE ACADEMIC		
ACCOUNT NUMBERS: 01325019801511		
BRANCH: TESHIE		
SWIFT CODE: STBGGHAC		
PHYSICAL ADDRESS: UBA GHANA		
(Foreign students are to pay USD\$50.00 for the application fee through bank transfer - e-mail Academic Registry for transfer details)		
Your application cannot be processed until we have received all of these items.		
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 GAFCSC Master's course. By filling this form, I also agree and accept that GAFCSC can use the information provided for both academic and administrative purposes that affect my application and admission into GAFCSC.		
Signature Date		
Please contact the GAFCSC Academic Division office if you have any queries or comments about this form. 0504041413 / 0302717783  Academic Division, GAFCSC, Out Barracks, Teshie, Accra.  Email: <a href="mailto:registrar@gafcscmil.edu.gh">registrar@gafcscmil.edu.gh</a> or <a href="mailto:academic.registry@gafcscmil.edu.gh">academic.registry@gafcscmil.edu.gh</a> Website: <a href="mailto:www.gafcscmil.edu.gh">www.gafcscmil.edu.gh</a>		

I. 7	This section is to be completed by the applicant.  After filling out this section, please give this CONFIDENTIAL Form to your Referee to complete		
	Ap	plicant's Name	
	Ap	plicant's Address	
	Cit	zy/Country	Programme of Study
	Da	te of Birth	
	Tel	lephone Number:	Fax Number
_	E-1	mail:	
	I h	ereby authorize the appropriate person to provid	le the information requested in this document.
	Applic	cant's Signature:	Date:
II.	GAFC	ction is to be completed by the Referee: CSC would appreciate your assessment of the appear and only in the evaluation of the participant's admission.	oplicant's qualities. The Centre will use your ion and its confidentiality will be safeguarded.
	Please	e complete this form as soon as possible and return to:	The Registrar GAFCSC Academic Division Otu Barracks, T e s h i e , A c c r a Tel.: +233(0)302717783 / 0504041413 Email: registrar@gafcscmil.edu.gh: academic.registry@gafcscmil.edu.gh Website: www.gafcscmil.edu.gh
1.	Gei	neral Rating	Website: www.gafcscmil.edu.gh
		Please indicate your opinion of this applicant in t Your assessment should be indicated in each case	the context in which you know him or her: by ticking of the appropriate check box:
	1.1	In your view, how does the applicant rate of	n the following personal characteristics:
		<b>Motivation</b> Very High ( ) High ( ) Above Average ( ) Average (	) Below Average ( ) Low ( ) Very Low ( ) Not Known ( )
		Self Discipline Very High ( ) High ( ) Above Average ( ) Average (	) Below Average ( ) Low ( ) Very Low ( ) Not Known ( )
		Leadership Very High ( ) High ( ) Above Average ( ) Average (	) Below Average ( ) Low ( ) Very Low ( ) Not Known ( )
		Self-Confidence Very High ( ) High ( ) Above Average ( ) 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 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	GAFCSC would appreciate your overall assessment of the applicant's academic capabilities:
III.	The Ref	
	Referee	's Name
	Organiz	ation
	8	
	Position	
	Address	
	Region/	City / Country
	Contact	Phone Number: Fax Number:
	Referee	's Signature and Stamp Date:
	E-mail	