

## Doctor of Philosophy in Business (PhD) Application Form

Please complete this form in **BLOCK CAPITALS**

Serial Code PhD/APP/C3/\_\_\_\_ [Office Use Only]

### In Affiliation with Ghana Institute of Management and Public Administration Gimpa.

The completed application package should be returned to: Nobel International Business School | 7 Oleander Street, East - Legon, Accra, Ghana or email: hod@nibs.edu.gh

### Personal Details

Title _____	Male/Female
Surname/Family Name _____	
Previous Surname _____	
First Name(s) _____	
Date of Birth (dd-mm-yy) <input type="text"/> - <input type="text"/> - <input type="text"/>	
Contact address * _____ _____ _____	Other Address (if different from home address) _____ _____ _____
Telephone no. _____	Telephone no. _____
Email address _____	Email address _____

### Fees Information

Who is expected to pay your fees? Yourself  | Sponsor  | Research Funding Body

### Further Details

Country of Birth \_\_\_\_\_

Do you have any unspent criminal convictions in any country? Yes  No

**Passport / National ID/ Voters ID number** \_\_\_\_\_

### Learning Support Needs

Do you have a disability, medical condition or learning difficulty? Yes  No

(If your answer is 'yes' Please give brief details; our Services support office will contact you and note that we will require documentary evidence of the above in order to make adjustments to the learning environment for you, where possible)

\_\_\_\_\_  
\_\_\_\_\_

**Education, Qualifications and Training**
**Higher Education/Further Education/Secondary Education** (please list most recent first)

Name of Institution	From (mm/yy)	To (mm/yy)	Type of certificate. Eg BSc. Economics

*Continue on separate sheet if necessary*

**Other Qualifications Completed or Relevant Training Undertaken** (please list most recent first)

Qualification	Major Courses	Date Awarded

*Continue on separate sheet if necessary*

**Qualifications Pending or Continuing training**

Qualification	Major Courses	Expected Grade	Date (mm/yy)

*Continue on separate sheet if necessary*

Professional Body Membership	
Professional Body	Date Joined

*Continue on separate sheet if necessary*

### Employment

Current Employer	
Name of Organisation _____	
Address _____	
_____	
Department _____	Job Title _____
Date appointed _____	

*Continue on separate sheet if necessary*

### Previous Employers (please list most recent first)

Organisation	Position Held	From (mm/yy)	To (mm/yy)

*Continue on separate sheet if necessary*

### Referees – Please provide two references, who might be contacted if need be

Name of referee 1 .....	Name of referee 2 .....
Organization .....	Organization .....
Relationship to you .....	Relationship to you.....

**Supporting documentation**

Please note that all applicants **must** include copies of the following when returning this application form:

- Application fee \$150.00 (non-refundable)
- Academic Certificates (HND/Bachelor's Degree)
- Academic Transcripts, including subjects studied and grades achieved
- 2 passport size photographs
- Photocopies of passport/ID Card to include photograph and personal detail page.

**Declaration**

I certify that, to the best of my belief, the information I have provided is complete and true.

**Signature of Applicant** ..... **Date** .....

**Marketing Information**

How did you learn about the program

- NiBS Staff Member     Website.....     Exhibition / Information Seminar  
 Newspaper or Magazine Advertisement     Brochure     Facebook     Twitter  
 LinkedIn     GooglePlus     Radio     TV    Other.....

**For Office Use Only**

Approval  Yes  No

Comments.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....