



# ACT American College of Technology

Phone: \_\_\_\_\_ Fax : \_\_\_\_\_  
P.O.Box: \_\_\_\_\_ Addis Ababa, Ethiopia  
E-mail: \_\_\_\_\_

## School of Graduate Studies APPLICATION FOR ADMISSION TO A POSTGRADUATE PROGRAMME

Two copies of this form should be completed by the applicant and returned to the Registrar Office

### SECTION A TO BE COMPLETED BY THE APPLICANT

**Type or Print in Block Letters:**

1. Programme applied for ..... Academic year .....
2. Enrollment Type:  
Regular fulltime  Regular Part-time  In-service  Extension
3. Full name .....
4. Date of birth .....
5. Gender:  Male  Female Martial Status .....
6. Region.....
7. Citizenship .....
8. Permanent Address .....
9. Postal Address..... Tel. No ..... Fax No .....
10. Name\* and Address of Employer .....

***\*Names must be those that appear on the applicant's academic document.***



**11. Secondary Schools and University attended (attach copies of certificates)**

i) Secondary School

Name of Institution

Dates of Attendance

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..... to .....

ii) College (where applicable)

Name of Institution

Award

Dates of Attendance

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..... to .....

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..... to .....

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..... to .....

iii) University

Name of Institution

Award

Dates of Attendance

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..... to .....

**12. First degree qualifications: (Attach copies of academic transcripts & certificates)**

i) Degree or equivalent.....

ii) Awarding University/Institution .....

iii) Date of Award .....

**13. Other qualifications (indicate dates and attach copies of certificates)**

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**14. Research and teaching experience**

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**15. Relevant publication (where applicable)**

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**16. Employment record (use separate sheet if necessary)**

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**17. Proposed field of study i.e. subject area**

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.....

**18. Names and address of three referees who are familiar with your academic ability and performance.**

- i) Name .....
- Address .....
- ii) Name .....
- Address .....
- iii) Name .....
- Address .....

**19. Name and address of sponsor.....**

.....

**20. Declaration by applicant:**

I declare that to the best of my knowledge, the information given above is correct.

Signature of applicant .....

Date .....



**SECTION B**  
**TO BE COMPLETED BY THE EMPLOYER**

21. I certify that ..... has been working here  
as ..... since .....
22. a) Will your organization release the applicant when admitted to the  
program?  
Yes/No .....
- b) Will your organization pay the student's fees? Yes/No .....
- Signature ..... Designation .....
- Date (with official stamp) .....

**SECTION C**  
**FOR OFFICIAL USE ONLY**

23. Recommended by the College/Council of .....
- i) Meeting ..... Date ..... Minute .....
- ii) Supervisor (s)
- a) Name .....  
Address .....
- b) Name .....  
Address .....
24. Approved by the Council of Postgraduate Studies and Research  
Meeting ..... Date ..... Minute .....
- Programme of Study approved .....
- Mode of Study approved (tick as applicable)
- a) Thesis



b) Course work and Dissertation

c) Coursework alone

25. Effective date of registration .....

**NOTES:**

1. No student is allowed to register for more than one college program at the same time. Breach of this regulation leads to automatic cancellation of admission to the College.
2. Cases of impersonation, falsification of documents or giving false/incomplete information whenever discovered either at registration or afterwards, will lead to automatic cancellation of admission.
3. Copies (not originals) of academic documents should be attached to each Application Form. The copies for the Degree certificates (s) and Academic Transcripts (s) should be certified.
4. Applicants themselves should request their referees to submit the reports directly to the REGISTRAR Office of American College of Technology. The College does not request for referees' reports on behalf of applicants.