MAY 2020 PROFESSIONAL TUITION PROGRAMME
(APPLICATION FORM – TUITION FOR JANUARY TO APRIL 2020 CLASSES)

PERSONAL PARTICULARS OF APPLICANT:

1. Full Name: Mr./Ms./Mrs……………………………………………………………………………………………………
   (In block letters and in the order as they would appear on your certificate)

2. Gender: Male [    ] Female [    ] Student’s Registration Number: (SRN)……………………………………
   E-mail:…………………………………………………………………………………………………………………………..
   Tel:………………………………………………………………………………………………………………………………

3. Choice of School: Indicate by marking (√) for the Stream and Level you are enrolling.

   LEVEL: Level 1: [    ] Level 2: [    ] Level 3: [    ]

   SCHOOL: Regular (Morning) [    ] Evening [    ] Weekend [    ]

4. SUBJECT(S) TO BE TAKEN:

   I. …………………………………………               II. …………………………………
   III. ………………………………………..                IV. ……………………………
   V. …………………………………………               VI. ……………………………

5. Referral Source: Where did you hear about us?
   a. ICAG Outreach / Social Media. Website ☑
   b. Family/ Friend/ Colleague ……………
   c. Others (Please Specify) ………………………………………

DECLARATION
I (Mr/Mrs/Ms)……………………………………………with SRN……………………declare that I agree to the terms above.

Student’s Signature ……………………………………….Date: …………………………………
## Fee List

<table>
<thead>
<tr>
<th>Level</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1 (One)</td>
<td>GHS 350 per paper</td>
</tr>
<tr>
<td>Level 2 (Two)</td>
<td>GHS 450 per paper</td>
</tr>
<tr>
<td>Level 3 (Three)</td>
<td>GHS 550 per paper</td>
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</tbody>
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