

Surname (family name)

First name

Other Name (s)

Date of Birth

Gender **Male** **Female**

Email address

Postal Address

Telephone Number (including country code)

Programme of Study

Institution

Cumulative GPA

Class obtained

Preferred role for Graduate Internship

Have you registered to undertake your national service during the 2024/2025 academic year? Yes No

NSS Pin

NSS Number

Statement of Purpose (1500 characters only)

CHECKLIST FOR SUBMITTING APPLICATIONS:

Please send copies of the following required documents as a **single PDF file saved with your full name only** to waccbipapplications@ug.edu.gh with email subject "*Graduate Internship-WACCBIP-DELTAS II Programme*".

COMPLETED APPLICATION FORM

CV (2 pages max)

OFFICIAL TRANSCRIPT

Signature