

**COMMISSION FOR TECHNICAL AND VOCATIONAL EDUCATION
AND TRAINING (CTVET)**

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photograph here.

APPLICATION FOR APPOINTMENT AS EXAMINER

SECTION A - PARTICULARS OF APPLICANT

1. Full Name [In block Capitals - Surname First]: Mr./Mrs./Ms./Miss./Rev./Dr./Prof. [Tick one]
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2. Nationality: Date of Birth:
.....
3. a. Office Address:
.....
- b. Residential Address:
- c. E-mail Address:
4. Telephone Number: Office: Cell:
.....
5. Present School/Institution/Work Place:
6. Present Rank/Position:
7. Name of Examination, Subject and Component you wish to be considered.
Separate Form must be used for different examinations e.g. Core or Elective]
 - a. Please tick appropriately
 - Elective programme
 - Core subject
 - Technical Drawing [Building option]
 - Technical Drawing [Mechanical option]
 - Practical Component
 - Access Course for Technical Institution graduates
 - b. State your subject area
8. Academic Qualification [Certified photocopies of certificates to be attached]

UNIVERSITY/COLLEGE ATTENDED	DEGREE/DIPLOMA OBTAINED	CLASS OF DEGREE/ DIPLOMA	MAJOR SUBJECTS OFFERED	DATE OF AWARD
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- Attach certified copies of transcript if certificate does not specify subject(s) studied.

9. Teaching Experience

NAME OF UNIVERSITY/COLLEGE/SCHOOL	DATE OF SERVICE		SUBJECT AND LEVEL TAUGHT	
	FROM	TO	SUBJECT	LEVEL

10. Work Experience [other than teaching]

OCCUPATION	NAME OF EMPLOYER	DATE		POSITION HELD
		FROM	TO	

11. Examining Experience: [include current one(s) if you are already an examiner]

	SUBJECT	LEVEL	STATUS	DATE

EXAMINATION BODY		(Access, O' Level, WASSCE, Tertiary, etc.)	(Assist. Examiner, Team Leader, Chief Examiner, etc.)	FROM	TO

12. If you have been an examiner before but are no longer one, explain why you stopped.

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13. Have you ever participated in any training course for examiners? [Tick one NO] YES
 If YES, supply details of the course in the table below

ORGANIZERS OF THE COURSE/ PROGRAMME	NAME OF COURSE/ PROGRAMME	PLACE OF COURSE/ PROGRAMME ORGANIZED	DATES COURSE/ PROGRAMME HELD	REASONS(S) FOR PARTICIPATION

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14. Any other relevant information:

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NOTE: All applicants are to pay GH¢100.00 on submission of the completed Application Form.

.....
SIGNATURE

.....
DATE

SECTION C: FOR OFFICE USE ONLY

SUBMISSION OF APPLICATION FORM	PHOTOCOPIES OF CERTIFICATE/TRANSCRIPT ATTACHED	APPLICATION ACCEPTED	APPLICATION REJECTED
<p>Received by:</p> <p>Checked by:</p> <p>Date:</p>	<p>Type of Certificate/Transcript</p> <p>1. 2. 3.</p> <p>Checked by:</p> <p>Date:</p>	<p>First Invitation (Date):</p> <p>Subject:</p> <p>OFFICER:</p> <p>Signature:</p> <p>Date:</p>	<p>State Reason(s):</p> <p>OFFICER:</p> <p>Signature:</p> <p>Date:</p>