

**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 2023/2024 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](mailto:waccbipapplications@ug.edu.gh) with email subject "*Graduate Internship-WACCBIP-DELTAS II Programme*".

COMPLETED APPLICATION FORM

CV (2 pages max)

OFFICIAL TRANSCRIPT

*Signature*