

OPTIMUM VOC. TRAINING INST.

In case of the reply the number and date of this letter should be quoted.

Our Ref. No. OVTI2022/INDEX/11.18
Your Ref. No.



Hohoe – Volta Region, Ghana

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Email : optimumvocationtraininginstitute@gmail.com

Our Core Values:

- ❖ DISCIPLINE & HARDWORK
- ❖ PROFESSIONALISM
- ❖ INNOVATION

BANKER: ADB

Date:

ADMISSION FORM

PERSONAL INFORMATION

FIRST NAME:

LAST NAME:

SEX: MALE ☐ FEMALE ☐

MARITAL STATUS:

DATE OF BIRTH:

POSTAL ADDRESS:

CONTACT NO.(S): WHATSAPP NO,:,.....

EMAIL:

PLACE OF BIRTH: HOMETOWN:

REGION: NATIONALITY:

OCCUPATION:

Passport Picture

PARENTAL / GUARDIAN INFORMATION

NAME OF PARENT/GUARDIAN:

RELATIONSHIP TO PARENT/GUARDIAN:

TEL NO(S):

POSTAL ADDRESS:

OPTIMUM VOC. TRAINING INST.

ATTACHMENTS

1. Two (2) size passport pictures
2. Photocopy of a national ID card

PROGRAMME TO OFFER

Please tick or select the course(s) to offer

CERTIFICATE

DIPLOMA

VIDEOGRAPHY / PHOTOGRAPHY

☐

ADVANCE MS-OFFICE

☐

BASIC COMPUTER / BASIC MS-OFFICE

☐

2D / 3D ANIMATION

☐

CLOUD COMPUTNG

☐

GRAPHIC / WEB DESIGNING

☐

DIGITAL LITERACY / MARKETING

☐

SYSTEM ENGINEERING

☐

GRAPHIC DESIGN / VIDEO EDITING

☐

NETWORK ADMINISTRATION

☐

COMPUTER HARDWARE

☐

SOFTWARE ENGINEERING

☐

Duration: Three (3) months

DATABASE TECHNOLOGY

☐

CYBER SECURITY

☐

SECRETARIAT MANAGEMENT

☐

CINEMATOGRAPHY

☐

Duration: Six (6) months – One (1) year

CHOICE OF SESSION

a. REGULAR

☐

b. WEEKEND

☐

c. ONLINE

☐

DECLARATION

I, declare that all the information provided above are true about me and in furtherance ready to suffer any penalty for any false information. I faithfully agree to be a student of the institution and promise to fulfil all conditions and obey all rules of the institution in the course of my studies. Payment made to the institution are not refundable.

Signature.....

Date.....

OPTIMUM VOC. TRAINING INST.

FOR OFFICIAL USE ONLY

NAME OF RECIPIENT

SIGNATURE.....

DATE.....

