



**GHANA TECHNOLOGY UNIVERSITY COLLEGE (GTUC)
CENTRE FOR PROFESSIONAL DEVELOPMENT (CPD)**

REGISTRATION FORM

PERSONAL DETAILS

Name _____
Last Name First Name Other Names

Gender Male Female

Title _____ Organisation _____

Address _____

Phone Number _____ Fax _____

Email _____

Course (Training programme you wish to apply for) _____

Date: _____

Applicant's Signature: _____