

University of Port Harcourt
Offshore Technology Institute



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APPLICATION FORM

SURNAME (BLOCK LETTERS): _____

FIRST NAME: _____

MIDDLE NAMES: _____

SCHOOL OR UNIVERSITY: _____
LAST ATTENDED (NAME IN FULL)

UNIVERSITY DEGREE: _____
(CURRENTLY BEING HELD)

STUDY PROGRAMME: _____
(APPLYING FOR)

MODE OF STUDY: _____
(FULL / PART TIME)

Address this form to The Director, Offshore Technology Institute, University of Port Harcourt, 1st floor, ETF Gas Engineering Building, Behind College of Science, Unipark campus, UNIPORT, P.O.BOX 50, UNIPORT Post Office.

Form Number	<i>UPH/OTI/M.Sc/2019/</i>
Form issued by	
Receipt Number	



Offshore Technology Institute

University of Port Harcourt

The information requested is treated as confidential. Only the information contained on pages 2 to 4 will be computerized for Admissions Committee purposes. The application form and the accompanying documents remain the property of the Institute.

1. **SURNAME AND USUAL FIRST NAME:** _____

2. **DATE OF BIRTH:** _____ **PLACE OF BIRTH:** _____

COUNTRY: _____

3. **NATIONALITY(IES):** _____

4. **GENDER:** Male Female

5. **MARITAL STATUS** Single Married Other

No. of Children: _____ **Ages of Children:** _____

6. **NATIONAL YOUTH SERVICE/MILITARY SERVICE**

Deferred Service completed Exempt Other

7. **PERMANENT HOME ADDRESS: (See instructions):**

Town: _____ **Zip code:** _____ **Country:** _____

Tel: _____ **Fax:** _____

E-mail (please print clearly): _____

8. **SOURCES OF FUNDING?**

Personal Organization Company None

Please give details _____

9. **CURRENT STATUS (EDUCATIONAL OR PROFESSIONAL)**

Student Employed Other Please give details

10. EMPLOYMENT HISTORY

Year	Company	Position Held	Job Function

11. SECONDARY EDUCATION

Year	Secondary	Qualification/GRADE	Secondary School Subjects passed and Grades

12. UNIVERSITY EDUCATION

Year	University	Qualification	CGPA	Class of Degree

13. PRIZES/AWARDS

Year	Prizes/Awards	Awarded by

14. LANGUAGES (see instructions):

	Spoken	Read	Written	Diploma/score/date
English				
French				
Other(s)				
.....				
.....				
.....				

Have you lived/stayed in other English-speaking countries: Yes No

Place(s) _____
 Date(s) _____
 Duration _____

15. PROFICIENCY IN ENGLISH (for non-native speakers):

School/University (indicate place, date, duration, qualification):

Have you lived/stayed in other English-speaking countries Yes No

Place(s) _____
 Date(s) _____
 Duration _____

16. INTERESTS AND MOTIVATION

What professional, cultural, sports and community activities do you participate in? Indicate other interests if any.

Have you held a position of responsibility? Under what circumstance?

What type of career are you aiming at?

What do you envisage of the offshore/subsea industry?

If your application is not successful what other plans do you have?

17. NAMES AND ADDRESSES OF TWO REFEREES (see instructions):

Name	_____	_____
Position	_____	_____
Company/Organization	_____	_____
Tel. No.	_____	_____
Fax:	_____	_____

I certify that to the best of my knowledge the facts stated on this form are correct and if found that the documents or information supplied contain irregularities, I consent to be withdrawn from the admission process.

Signature and Date: _____

NOTES FOR COMPLETING THE APPLICATION FORM

You have decided to apply for admission to the M.Sc. Degree Programme of the Offshore Technology Institute. Please submit the documents listed below:

- a) Complete the Application form using these instructions. Please write CLEARLY and use BLACK INK OR TYPE.
- b) A handwritten letter stating your reasons for applying.
- c) Curriculum vitae of ONE PAGE ONLY.
- d) E-mail address which may be used to contact applicants
- e) 2 photocopies of your Academic Credentials i.e. WAEC, GCE & University degree, etc and, if applicable, an attestation of attendance at an educational establishment. Academic Transcript **MUST** be forwarded via courier or Post to the Director, OTI, UNIPORT, P.O. Box 50, UNIPORT Post Office, Choba, Port-Harcourt and **should not** be Hand carried by the applicant.
- f) Detailed records of results (class of degree, final CGPA) attained in higher education.
- g) Four (2) recent identity photographs with your last name, first name, & course applied for on the reverse side
- h) Submit duly completed form along with twenty thousand naira Bank draft in favor of Offshore Technology Institute, UNIPORT, with your name written on the reverse side of the draft, in person to **Gladys Madu**, OTI-UniPort, *1st floor, ETF Gas Engineering Building, Behind College of Science, Ofrima, UNIPARK Campus*, **or by Courier to the Director, OTI-UNIPORT, P.O.BOX 50, UNIPORT Post Office, Choba**. Submit also a copy of the form on-line. For further enquiries call 0705 3058 407 (Work days & Hours Only), email: *catherine.okwudiri@otiuniport.org*.

PERMANENT ADDRESS:

Indicate the address to which you wish to receive correspondence (further information, decision on Admission, etc.)

LANGUAGES: Indicate the level of proficiency using the following codes:

A: Fluent B: Good C: Average D: Poor

NAMES, ADDRESSES & PHONE NUMBER (S) OF TWO REFEREES:

If possible:

- An academic (Lecturer, Head of Department, Professor)
- A corporate officer (employer, training period supervisor, etc.).

The references should be enclosed with the application form, Bank Draft, One page CV, Handwritten letter stating reasons for applying and sent to the Director, Offshore Technology Institute (OTI), UNIPORT, 1st floor, ETF Gas Engineering Building, Behind Faculty of Science, UNIPARK Campus, or by Courier to the Director, OTI-UNIPORT, P.O.BOX 50, UNIPORT Post Office, Choba.