

MINISTRY OF EDUCATION
GHANA EDUCATION SERVICE/TVET SERVICE
CSSPS SCHOOL SELECTION FORM

CANDIDATE'S NAME:.....

INDEX NUMBER:.....

NAME OF JHS

GENDER:.....

DISTRICT:.....

REGION:.....

CANDIDATE'S SCHOOL CHOICES

SN	SHS/TVI CODE	SHS/TVI SCHOOL NAME	CATEGORY	PROG. CODE	PROG. NAME	DAY/BOARDING	CLUSTER OPTION (yes/no)
1							
2							
3							
4							
5							
6							

PARENT/GUARDIAN NAME:.....

CONTACT:.....

SIGNATURE:.....

DATE:.....

HEAD'S CONTACT:.....

SCHOOL STAMP:.....