

EXECUTIVE SPORTS COURSE APPLICATION FORM



**VALLEY VIEW UNIVERSITY**  
PASSING ON A PASSION FOR EXCELLENCE, INTEGRITY AND SERVICE



**SECTION A PERSONAL DETAILS**

Surname:	<div style="text-align: center;">Fix Photograph here</div> <div style="text-align: center;">Please write your name and proposed programme at the back of the photo</div>		
First Name:			
Other Name (if any):			
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			
Date of Birth:      Day      Month      Year <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>			
Place of Birth:	Passport No:	Social Security No: <small>(if applicable)</small>	National ID No:
Nationality:			
Marital Status:			
Permanent Mailing Address:			
Current Mailing Address: (if different from above)			
Fax No:	Tel Phone:	Mobile:	E-mail:
Country of current residence:			

**SECTION B PROGRAMME OF STUDY**

*Please indicate in order of preference your proposed programmes of study (refer to the below list programmes)*

CHOICE	PROGRAMMES
<i>1st Choice</i>	
<i>2nd Choice</i>	
<i>3rd Choice</i>	

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>Football Business Management &amp; HR</li> <li>Football Intermediary / Agent</li> <li>Football Scouting &amp; Talent ID</li> <li>Performance &amp; Video Analysis</li> <li>Football First Aid &amp; Emergency</li> <li>Football Goalkeeper -Training (Level 1/2)</li> </ul> | <ul style="list-style-type: none"> <li>Disable Sports Coaching (Level 1/2)</li> <li>Futsal Football Coaching (Level 1/2)</li> <li>Weightlifting Instructor Training</li> <li>Sports Marketing &amp; Public Relationship (PR)</li> <li>Football Professionalism &amp; Public Speaking</li> <li>Football Safeguarding &amp; Spectator-Safety (Steward)</li> </ul> |
|--|---|

**SECTION C****EDUCATION AND QUALIFICATION**

*Please attach certified copies of result slips and certificates*

School / Institution College	Dates		Qualification	Date Obtained
	From	To		

**SECTION D****DETAILS OF GUARDIAN / SPONSOR/ NEXT OF KIN**

Title: Mr./Mrs./Ms/Miss/Pr/Dr/Nana		Permanent Address:	
Name			
Relationship to Application:	Tel:	Mobile:	
	Fax:		
Occupation:	Email:		



**SECTION E**

**Current Club / Reference**

Current Club  Division  Position

Club Email  Club Tel:

Club Reference (Name)  Tel:

Other Reference (Name)  Tel:

**SECTION F**

**RELIGIOUS AFFILIATION**

Christian     Moslem     If other, specify \_\_\_\_\_

If Christian, specify denomination:

Who referred you to Valley Vie University? -----

Note:

1. All fees (Tuition and general charges are due and payable upon registration to the University Bank Account
2. For all financial information, contact the student Account office, Valley View University on 0307011877, 0307011878 or e-mail: [studentfinance@vvu.edu.gh](mailto:studentfinance@vvu.edu.gh)
3. For further inquiries contact the Admission Office on 0307011877, 0307011878 or e-mail: [studentfinance@vvu.edu.gh](mailto:studentfinance@vvu.edu.gh)

**SECTION G**

**DECLARATION**

The information on this form is to the best of my knowledge correct, I understand that any offer of a place to me as an undergraduate or diploma student will be based upon the information given on this form, and that if I am found to have given false information, the offer may be withdrawn. I understand given on this form, will be retained by the University and will be used for the purpose of the processing my application, If my application is accepted the information will form part of my permanent student records. If I am admitted to the University, I promised to abide by all the policies and regulations of the Valley View University

Name of Applicant \_\_\_\_\_ Name of Sponsor/ Guardian \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_



Statement on Sabbath Services, Vegetarian Meals, Dressing, the Possession and Use of Tobacco, Alcoholic Beverages and Drugs on Campus

MISSION

Valley View University, a Seventh-day Adventist institution, emphasizes spiritual, academic, vocational, and technological excellence for service to God and humanity.

CORE VALUES

Excellence, Integrity, and Service

In pursuit of these mission and core values, the University expects all applicants who choose to enroll at the Valley View University to take note that:

- 1. The Valley View University cafeteria, like cafeterias in other Seventh-day Adventist-operated schools, colleges and universities throughout the world, serves only vegetarian meals. Scientists have found out that one lives a healthier life and possibly longer when on vegetarian diet – the ideal diet originally given to man by God in the Garden of Eden.
2. No coffee or tea is served in the cafeteria because these beverages are known to contain high levels of caffeine which is detrimental to human health.
3. The Valley View University campus is an "alcohol and drug-free campus". All students are expected to abstain from possessing or using drugs and alcoholic beverages on campus. Smoking is also not allowed anywhere on the University campus.
4. The University encourages all students in residence to participate in the worship activities which are conducted during the Sabbath hours (i.e. from sunset Friday to sunset Saturday) as part of the University's spiritual development programme.
5. The Valley View University has a dress code and ALL students, while on campus, are required to comply with the code as detailed in the Student Handbook.

Acceptance:

I, ....., having read and accepted the practices stated above, promise to abide by them if offered admission to Valley View University.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_

Endorsement by Parent, Guardian or Sponsor:

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_