

ADMISSION FORM

PART 1:

PERSONAL INFORMATION

FIX PASSPORT
PICTURE HERE.

FIRST NAME

LAST NAME

OTHER NAMES

SEX

MALE

☐

FEMALE

☐

DATE OF BIRTH: DAY/MONTH/YEAR

COUNTRY OF ORIGIN

NATIONALITY

ADDRESS

TOWN OF RESIDENCE

HOME ADDRESS/GHANA POST ADDRESS
(FOR EMERGENCY PURPOSES)

TOWN/CITY

MOBILE NUMBER

ACTIVE WHATSAPP / TELEGRAM NUMBER

ACTIVE E-MAIL ADDRESS

HEALTH

DO YOU HAVE ANY ONGOING HEALTH CONDITION WE NEED TO
KNOW OF?

YES

☐

NO

☐

PLEASE STATE IF YES

EMERGENCY CONTACT

NAME

MOBILE NUMBER

RELATION

SOCIALS

INSTAGRAM HANDLE

FACEBOOK HANDLE

LINKEDIN PROFILE URL

EMPLOYMENT/SKILLS

OCCUPATION

LANGUAGES SPOKEN:

Do you have prior skills in Fashion?

YES ☐ NO ☐

COURSE SESSION

ENROLLMENT SESSION

SESSION 1 (JANUARY TO JULY) ☐

SESSION 2 (AUGUST TO JANUARY) ☐

STREAM

Weekday (Morning) ☐

Weekday (Evening) ☐

Weekend (Saturday Only) ☐

ATTACHMENT

IDENTIFICATION (GHANA CARD / PASSPORT)

KINDLY ATTACH A COLOURED COPY OF YOUR GHANA CARD/VALID PASSPORT TO THIS FORM UPON SUBMISION



PART 2:

SELF ASSESSMENT TEST

WHAT IS YOUR FAVORITE COLOR? AND WHY?

WHAT IS YOUR PREFERENCE MUSIC GENRE?

DO YOU KNOW YOUR LEARNING STYLE?

TICK BELOW YOUR LEARNING STYLE

- | | |
|---|--|
| <input type="checkbox"/> VISUAL (LEARNING BY SEEING) | <input type="checkbox"/> KINESTHETIC (LEARNING BY DOING) |
| <input type="checkbox"/> AUDITORY (LEARNING BY HEARING/LISTENING) | <input type="checkbox"/> SOCIAL (LEARNING WITH A GROUP) |
| <input type="checkbox"/> READ/WRITE (LEARNING BY READING & WRITING) | <input type="checkbox"/> SOLITARY (LEARNING ALONE) |

WHAT ARE YOUR HOBBIES?

WHY DO YOU WANT TO PURSUE A CAREER IN FASHION?

WHY DO YOU WANT TO STUDY WITH RIOHS?

WHAT DO YOU HOPE TO ACHIEVE AT THE END OF THE 6 MONTH'S PROGRAM WITH RIOHS?

PART 3:

How did you hear about us?

- | | | |
|------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> GOOGLE | <input type="checkbox"/> FACEBOOK | <input type="checkbox"/> FRIEND RECOMMENDATION |
| <input type="checkbox"/> INSTAGRAM | <input type="checkbox"/> YOUTUBE | <input type="checkbox"/> WHATSAPP STATUS |

