# NATIONAL YOUTH AUTHORITY (NYA)

### NATIONAL APPRENTICESHIP PROGRAMME APPLICATION FORM

Serial No: .....

### **SECTION 1: PERSONAL INFORMATION**

1. Full Name:

First Name:	Middle Name:	Last Name:	

2. Date of Birth:

Day: \_\_\_\_ Month: \_\_\_\_ Year: \_\_\_\_\_

3. Gender:

 $\Box$  Male  $\Box$  Female

4. Marital Status:

 $\Box$  Married  $\Box$  Single

5. Religion

 $\Box$  Muslim  $\Box$  Christian  $\Box$  Other

6. Disability Status

Do you have a disability?

 $\Box$  Yes  $\Box$  No

If yes, please specify the nature of the disability:

7. Current place of Residence: \_\_\_\_\_

8. Ghana Card ID:		
9. Contact Information:		
- Mobile Phone Number:		
- Email Address:		
- Residential Address/Ghana Post Co	ode:	
District:	Region:	
10. Emergency Contact:		
Name:	_Relationship:	Phone:
SECTION 2: EDUCATIONAL BAC	CKGROUND	
11. Highest Level of Education Comp	leted:	
□ Primary School □ Junior High So	chool □Senior High Scho	ool 🗆 Diploma 🗆 Bachelor's
Degree $\Box$ Master's Degree $\Box$ Other:	-	_
12. List any Certifications or Addition	al Training (if applicable)	):
Certification/Training:	Institution:	Year:

# SECTION 3: PROGRAMME-SPECIFIC QUESTIONS

13. Why are you interested in the National Apprenticeship Programme?

14. Trade Area of Interest for Apprenticeship:

 $\Box$  Agriculture  $\Box$  Technology

15. Preferred Location for Training:

City:

Region:

16. Additional Information

Have you ever participated in an apprenticeship programme before?

- Yes

- No

If yes, please provide details:

17. Do you have any medical conditions that may affect your participation in the programme?

 $\Box$  Yes  $\Box$  No

If yes, please specify:

### **SECTION 4: GUARANTORS**

18. Provide two Guarantors	18.	Provide	two	Guarantors
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1:

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

- Relationship: \_\_\_\_\_

- Contact Number:	
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- Email: \_\_\_\_\_

2:	
- Name:	
- Relationship:	
- Contact Number:	
- Email:	

# **SECTION 5: DECLARATION AND CONSENT**

19. Declaration:

I, \_\_\_\_\_ (Applicant's Full Name), hereby declare that the information provided in this application form is true and accurate to the best of my knowledge. I understand that falsification of information may lead to disqualification from the programme.

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

20. Consent for Background Checks:

□ I consent to the National Youth Authority conducting background checks, including verification of educational qualifications, as part of the selection process.

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

#### **SECTION 6: SUBMISSION DETAILS**

- How to Submit:

Please submit this completed form along with the following documents:

1. Copy of valid ID

- 2. Recent passport-sized photograph
- 3. Guarantor's Signed Form

- Submission Method: 
  Online Portal 
  Email 
  Physical Submission
- Online Portal Link: nya.gov.gh/napapply
- Email Address: napapply@nya.gov.gh
- Physical Submission Address: Nearest National Youth Authority District/Regional Office

Thank you for applying to the National Youth Authority's National Apprenticeship Programme! We wish you the best of luck with your application.