



Institut Supérieur de Communication et de Gestion (ISC G UNIVERSITY)

ACCREDITATION N° 049/MESRS/CAB/DC/SGM/DGES/DPES/SA

TEL: (229) 67 45 75 64 – 94 82 89 64

E-mail: iscgbenin@gmail.com **Web site:** www.iscg.edu.bj

ADDRESS : Le Bélér zones des Ambassades. Cotonou. Rep of Bénin.

Affix Passport

Photo

APPLICATION FORM UNDERGRADUATE DEGREE

PART A

STUDENT INFORMATION

Title: Mr ☐ Ms ☐ Others _____

Full Name

Contact Address

Home Telephone Number Mobile Number

Email Sex: Male ☐ Female ☐ Date of Birth

Place of Birth Nationality

Passport/National ID card Number Marital Status

PART B

GUARDIAN INFORMATION

Title: Mr ☐ Ms ☐ Others _____

Full Name

Contact Address

Home Telephone Number Mobile Number

PART C

ACADEMIC QUALIFICATION

EDUCATION INSTITUTION ATTENDED (Please attach certified true copies of certificate and academic transcripts)

From (mm/yyyy)	To (mm/yyyy)	Qualifications	Secondary school /Institution /University



MINISTÈRE
DE L'ENSEIGNEMENT SUPÉRIEUR
ET DE LA RECHERCHE SCIENTIFIQUE
RÉPUBLIQUE DU BÉNIN



ACCREDITED BY
CONSEIL AFRICAIN
ET MALGACHE POUR
L'ENSEIGNEMENT SUPÉRIEUR



PART D DECLARATION

1. DECLARATION BY APPLICANTS

I wish to apply for admission to the **INSTITUT SUPERIEUR DE COMMUNICATION ET DE GESTION (ISCG) PROGRAMME** and declare that to the best of my knowledge and belief, the above particulars are true. I agree that registration of this application does not confer any right on me in respect of selection for admission, which is solely left to the discretion of the institution. If I am given admission, I affirm I will be subject to and follow all the regulations of the institution.

Signature: _____ Date: _____ Name: _____

2. DECLARATION BY PARENT/GUARDIAN

I hereby declare that the information given in this form is true. I am aware of the financial obligation of my child/ward studying at this institution and I undertake to pay the tuition and other fees payable to the institution under its rules. I also affirm that my child/ward will follow and be subject to all regulations of the institution.

Signature: _____ Date: _____

Name: _____

PART E OFFICE USE ONLY

ADMISSION OFFICER

ADMISSION TYPE: FRESHER

☐

DIRECT ENTRY 200L

☐

DIRECT ENTRY 300L

☐

DEPARTMENT

ADMISSION DECISION: ACCEPTED

☐

REJECTED

☐

UNDERGRADUATE DEGREE PROGRAMMES

<ul style="list-style-type: none"> ➤ Accounting and Audit ➤ Business Management ➤ Banking and Finance ➤ Human Resource Management ➤ Marketing Communication ➤ Project Management ➤ Public Administration ➤ Economics ➤ Computer Science ➤ Estate Management 	<ul style="list-style-type: none"> ➤ Information and Communication Technology ➤ Transport and Logistics ➤ Mass Communication ➤ Law (Business Law, Private Law and Public Law) ➤ International Relations ➤ Political Science ➤ Environmental Science ➤ Urban and Regional Planning ➤ Geography
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