



Image is Everything

INSTITUTE OF PUBLIC RELATIONS, GHANA

2017 ACCREDITATION REGISTRATION FORM

Name: _____

Email: _____

Mobile Number: _____

Address: _____

Organization: _____

Designation: _____

Membership Category: _____ Number: _____

1. Are you in good standing? Yes No (Tick)
2. What level are you registering for? Level I Level II (Tick)
3. Are you registering for both the course and examinations? Yes No (Tick)

4. State your academic qualifications, year obtained and institution that awarded the certificate

	NAME OF CERTIFICATE	YEAR OBTAINED	AWARDING INSTITUTION
1			
2			
3			
4			
5			

5. How many years of PR practice do you have after qualification?

a. Academic qualification

b. Level I qualification

6. Who will pay your fees? Self Organization (Tick)

Signature: _____ Date: _____

CONTACT ADDRESS

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