MINISTRY OF EDUCATION GHANA EDUCATION SERVICE/TVET SERVICE

CSSPS 2024 SCHOOL SELECTION FORM

NB: SELECT COMPULSORY 2ND PLACEMENT SCHOOLS AT THE BACK OF THIS DOCUMENT

SELECTION GUIDELINES

Candidates who wish to enter SHS/TVET schools must, with guidance from parents/guardians and school authorities:

- a) Select Six (6) schools and rank them in order of preference with the 1st being the most preferred choice.
- b) Select programmes and residential status for each choice of school.
- c) Select a compulsory day school as the 6th choice within 16km of the JHS attended or choose a boarding school from the list of schools in Appendix 3.
- d) Select Five (5) schools from Appendix "4" for a consideration of 2nd placement if you miss out on all your initial six (6) choices.

PLEASE NOTE THAT CANDIDATES:

- a) Cannot choose more than one (1) School from Category A
- b) Cannot select more than two (2) schools from Category B
- c) May select five (5) schools from Category C and One (1) from Category D (Day) or Appendix 3 (Special Boarding).
- d) Lastly, candidates who wish to offer purely TVET Programmes must select all six (6) TVET Institutes from CATEGORY A, B and C as Day or Boarding

| CANDIDATE'S NAME : | INDEX NUMBER: |
|--------------------|---------------|
| NAME OF JHS | GENDER: |
| DISTRICT: | REGION: |

CANDIDATE'S CHOICES

| S/N | SCHOOL | SCHOOL NAME | CATEGORY | PROGRAM | PROGRAM NAME | DAY/ |
|-----|--------|---|----------|---------|--|----------|
| | CODE | Toward Company | 100 | CODE | The state of the s | BOARDING |
| 1. | | | | - / 1 | and a second | |
| 2. | | The sale sales | | E ALIAN | | |
| 3. | | 100000000000000000000000000000000000000 | | 2000 | | |
| 4. | | MODELL | | JUST | | |
| 5. | | +H+= | | | Call. | |
| 6. | | | | | | |

CSSPS 2024 SCHOOL SELECTION 2ND PLACEMENT FORM

Candidates must select Five (5) schools from Appendix "4".

Candidates must not repeat a school from the initial six (6) choices on this cluster form

(In the event a candidate misses out on all initial six (6) choices, the candidate may be placed in any of the schools in the selected cluster as indicated below)

CANDIDATE'S CLUSTER FORM

| S/N | SCHOOL SCHOOL NAME | | PROGRAM CODE PROGRAM NAME | | DAY/ BOARDING | |
|-----|--------------------|--------------|---------------------------|-------|------------------|--|
| 1. | 100 | 31/ 22 | | | | |
| 2. | | | | | | |
| 3. | | | | 7 600 | E | |
| 4. | | 1100 to 1500 | | ** | | |
| 5. | | | | | | |

| NAME OF PARENT/GUARDIAN: | | CONTACT: |
|--------------------------------|----------------------------------|----------|
| PARENT'S/GUARDIAN'S SIGNATURE: | | DATE: |
| HEADTEACHER'S CONTACT: | HEAD TEACHER'S STAMP & SIGNATURE | |

NOTE THAT THIS FORM MUST NOT BE SUBMITTED WITHOUT THE CONSENT OF PARENT/GUARDIAN AND MUST BE VALIDATED BY THE HEAD TEACHER.