

MINISTRY OF EDUCATION
GHANA EDUCATION SERVICE/TVET SERVICE

CSSPS 2023 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 5 schools (1 category A, 2 category B and at least 2 Category C 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 or STEM Programmes must select all six (6) Institutes/Schools 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 CODE	SCHOOL NAME	CATEGORY	PROGRAM CODE	PROGRAM NAME	DAY/ BOARDING
1.						
2.						
3.						
4.						
5.						
6.						

CSSPS 2023 2ND PLACEMENT SCHOOL SELECTION FORM

Candidates must select **'5 schools from appendix "4"** (1 Category A school, 2 Category B schools and at least 2 Category C schools).

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 CANDIDATE'S CHOICES

S/N	SCHOOL CODE	SCHOOL NAME	CATEGORY	PROGRAM CODE	PROGRAM NAME	DAY/ BOARDING
1.						
2.						
3.						
4.						
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.

FREEDOM

JUSTICE

AND