

**AFRICA CENTER OF EXCELLENCE  
CENTRE FOR PUBLIC HEALTH AND TOXICOLOGICAL RESEARCH  
UNIVERSITY OF PORT HARCOURT**



APPL/2024/PHD/PUT/.....

PASSPORT  
PHOTO

## APPLICATION FORM

*APPLICATION FOR ADMISSION INTO DOCTORAL PROGRAMMES  
2024/2025 ACADEMIC SESSION*

1. SURNAME (BLOCK CAPITAL):
2. OTHER NAMES
3. FORMER NAME (IF APPLICABLE, EVIDENCE SHOULD BE ATTACHED):
4. DATE OF BIRTH:
5. PLACE OF BIRTH:
6. MARITAL STATUS:
7. NATIONALITY:
8. STATE OF ORIGIN:
9. PRESENT EMPLOYMENT:
10. PRESENT ADDRESS:
11. TEL. NO:
12. EMAIL ADDRESS:

13. Educational Institutions Attended with Dates and Academic Qualifications with Dates:

INSTITUTION	QUALIFICATION	START DATE	COMPLETION DATE	GRADRCGPA

14. Current Status:    Student                      Employed                      Others (please give details)
15. Sources of Funding:    Personal                      Government                      Organisation                      None (please give details)



27. What type of career are you aiming for? (Please see instruction on preparing a statement of purpose)

28. Names, Addresses and Emails of three (3) Referees:

S/N	Name	Address	Email	Phone
1				
2				
3				

29. Declaration of Applicant

I hereby declare that the particulars which I have supplied are true to the best of my knowledge and belief. I am aware that withholding or giving false information automatically disqualifies me from gaining admission. If admitted to the University, I shall regard myself bound by the rules and regulations of the university.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**PROSPECTUS TELLER DETAILS**

NAME OF BANK	BRANCH/LOCATION	TELLER NUMBER	AMOUNT	DATE ON TELLER
<b>ACCOUNT OFFICER'S SIGN:</b>			<b>DATE:</b>	

Email: [aceputor@uniport.edu.ng](mailto:aceputor@uniport.edu.ng) Phone: +234(0)7018285531, +234(0)8129429447, +2348068891060 (Accounts)

Completed Form should be returned to: The Centre Leader, Africa Centre of Excellence in Public Health and Toxicological Research (PUTOR), East-West Road, Opposite the Choba Area Police Command, University of Port Harcourt, Choba OR Email to

[aceputor@uniport.edu.ng](mailto:aceputor@uniport.edu.ng), [adminaceputor@uniport.edu.ng](mailto:adminaceputor@uniport.edu.ng)

**Deadline for submission is Friday 7<sup>th</sup> February 2025**