



Addis Continental Institute of Public Health
GENERAL MASTER OF PUBLIC HEALTH PROGRAM
APPLICATION FORM
APRIL 2022

Instruction:

1. USE CAPITAL LETTERS
2. COMPLETE APPLICATION
3. Email the scanned copy of the following documents along with your application form to the registrar office.
 - a. Your Degree
 - b. ESLCE / equivalent
4. Official TRANSCRIPT; mailed directly to Addis Continental Institute of Public Health by your previous institution of higher education: P.O.Box 26751 code 1000, Addis Ababa Ethiopia.
5. Three letters of recommendations emailed directly to registrar.aciph@gmail.com (form available at www.addiscontinental.edu.et/apply-to-aciph)

Photo

INFORMATION: The training will be conducted at the Addis Continental Institute of Public Health, Addis Ababa for September 2022 admission. Addis Continental Institute of Public Health will offer the DEGREE upon successful completion of all requirements. **Application for the program is considered eligible if and only if application fee is deposited and deposit slip/ payment proof is emailed to registrar at registrar.aciph@gmail.com.**

Name & Title (Mr. Mrs, Ms, Dr.)	<input type="text"/>	<input type="radio"/>	Female
		<input type="radio"/>	Male
Date of Birth in E.C	<input type="text"/>	Nationality	<input type="text"/>
Current position/Job Title	<input type="text"/>		
Institutional Affiliation (Employer)	<input type="text"/>		
Mobile Number	<input type="text"/>	Office/Home Tel:	<input type="text"/>
Applicant Email Address	<input type="text"/>		

Present Address:

Region	<input type="text"/>	Woreda	<input type="text"/>
Kebele	<input type="text"/>	House Number	<input type="text"/>
Telephone Mobile	<input type="text"/>	Telephone Home	<input type="text"/>
Contact Person in case of Emergency	<input type="text"/>		
Contact person's Telephone	<input type="text"/>		

Post-Secondary Education

Year & Month	Institution Attended	Major Subject	Degree Completed

List relevant work experience *(Begin with most recent employment, and include all current jobs. You may attach additional information on a separate page if necessary.)*

Dates from-to	Position/ title	Employer	City/ Country

List your publication *(If necessary, place on separate sheet)*

Title of Publication	Date, where published (Journal)

List Award: scholarships, fellowships, grants, or other awards you received, including grants to attend international conferences, workshops, or seminars. *(If necessary, place on separate sheet.)*

- 1
- 2
- 3
- 4
- 5

List Three Reference: reference letters (recommendation letters) must be submitted in support of your application. Please use the reference form of ACIPH available on the website to obtain recommendations

1	
2	
3	

Financial Support

- Government Organization
- Non-Government Organization (sponsorship letter must be submitted to the Registrar office along with the application)
- Self-Sponsor

Date of Application		Signature	
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Email the completed application to admission.aciph@gmail.com.

Application Deadline: June 30, 2022
Entrance Examination: July 16, 2022

For Futher Information:
Call : 0116390004 / 00
Email: registrar.aciph@gmail.com / mph.aciph@gmail.com / admission.aciph@gmail.com
visit: www.addiscontinental.edu.et

OFFICIAL USE ONLY	
<input type="radio"/> Admitted	<input type="radio"/> NOT Admitted
Name of Responsible Person	
Date	
Signature Field	