



Tel. (025) 553- 00-20

ጻፊ (025) 553-03-32

ኮፍታ ስልክ

P.O.Box 138

ቦ.ጻ.1

Dire Dawa

138

Ethiopia

ድሬዳዋ

Web site: [www.haramaya.edu.et](http://www.haramaya.edu.et)

**APPLICATION FORM FOR POSTGRADUATE CONTINUING  
EDUCATION PROGRAM (CEP)-2017/1/8(2010 E.C) ACADEMIC YEAR**

**I. INSTRUCTIONS**

1. For clarity, please USE CAPITAL LETTERS TO FILL OUT THIS FORM.
2. Complete this application form in ONE COPY
3. Submit the following documents along with filled out application form.
  - (a) TWO COPIES of the official transcript of academic record of the Bachelor's Degree.
  - (b) AN AUTHENTICATED PHOTO-COPY of the Degree
  - (c) First Degree holders from universities outside Ethiopia must present a copy of results of GCE or West African Schools Certificate of Oxford Examination or any other accredited high school examination result paper.
  - (d) Two recommendation letters(one from first degree instructor and the other from employer)
  - (e) A postal order of **50** Birr to Haramaya University post office as an application fee payable to Non-regular Postgraduate Program Office, Haramaya University.
4. The enclosed recommendation letters should preferably be mailed earlier directly by your referees to the address above
5. NOTE: Applications must be submitted to the respective CEP Centers [**Haramaya University, (HU) main campus and Chiro**] from **04 September 2017/Nehase 29/2009 EC** to September 25/2017 or Meskerem 15/2010 EC.
6. Entrance Examination Date & place : **Tentative October 01/2017 or Meskerem 21/2010 EC; at HU main campus and at respevtove CEP Centers**

NB. The payment for the course work of postgraduate study (M.Sc/M.A.) is

- A. **Birr 550/credit hour at HU main campus, Harar & Dire Dawa Centers.**
  - B. **Birr 700/credit hour at Jigjiga and Chiro Centers.**
  - C. Thesis supervision is **Birr 4,500.00** and thesis examiners **Birr 4,500.00**.
  - D. The overall tuition fee for **30** credit hours course work, supervision and thesis examiners fees is estimated **Eth. Birr 27,450.00** (twenty seven thousand four hundred fifty) at **HU main campus, Harar & Dire Dawa Centers**, and **Birr 32,100.00** (thirty two thousand one hundred) at **Chiro and Jigjiga Centers** including supervision and thesis examination fees. This cost does not include fees for remedial courses, extra course taken beyond 30 credit hours and research expenses.
7. without submitting this application form, **No** student shall be allowed to seat for entrance examination.

8. Please Put an 'X' mark in the box of your choice

**1. Personal Details**

1.1 Full Name: \_\_\_\_\_  
Name                      Father's name                      Grandfather's name (for Ethiopians)  
First Name                      Middle Name                      Family Name (for non-Ethiopians)

1.2 Sex:              Male               Female

1.3 Place of Birth: \_\_\_\_\_  
Kebelle              Town/City              Woreda              Region              Country

1.4 Date of Birth:  
European Calendar: Date \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_  
Ethiopian Calendar: Date \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

1.5 Permanent Address:  
Postal Address: \_\_\_\_\_  
\_\_\_\_\_  
Mobile Phone Number: \_\_\_\_\_ Land Line Number \_\_\_\_\_  
Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

1.6 Marital Status:      Single               Married               Divorced

**2. Family Background**

2.1 Your Father's full address:  
Postal Address: \_\_\_\_\_  
\_\_\_\_\_  
Mobile Phone Number: \_\_\_\_\_ Land Line Number \_\_\_\_\_

2.2 Your Mother's full name \_\_\_\_\_

2.3 Give your Mother's address if not similar to your Father's address:  
Postal Address: \_\_\_\_\_  
\_\_\_\_\_  
Mobile Phone Number: \_\_\_\_\_ Land Line Number \_\_\_\_\_

2.4 Person to be contacted in times of emergency:  
Full Name: \_\_\_\_\_ Relationship \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
\_\_\_\_\_  
Mobile Phone Number: \_\_\_\_\_ Land Line Number \_\_\_\_\_

**3. Educational Background**

3.1 Secondary School (s) attended (List the last three schools in chronological order)

No	School's Name	Town	Year Attended (Eth.C)
1.			
2.			
3.			

3.2 Field of the study attended in Secondary school:

Academic Fields: Natural Sciences  Social Science  Vocational   
 Agriculture  Home science  Commerce  Productive   
 Technology  Others (Please specify) \_\_\_\_\_

3.3 Information on ESLCE Grade or EHEEQC Score

List five subjects including MATHEMATICS and ENGLISH in which you have earned your best grades or score;

List five (5) subjects including Mathematics and English in which you have earned your best grades/Score			
No.	Subject	Year (E.C.)	Grade/Score
1.			
2.			
3.			
4.			
5.			

3.4 Post-Secondary Education

3.4.1 Have you enrolled in any post-secondary education institution (University or College) in Ethiopia or abroad? Yes  No

3.4.2 If your answer is “Yes”, please give the details bellow and attach the necessary documents.

No	Name of Institution	Country	Years attended from---to---	Completed (Dep./Deg./ Cert., etc)	C.G.P.A
1.					
2.					
3.					
4.					
5.					

**4. Employment**

4.1 Are you currently employed? Yes  No

4.2 If “Yes” please write the name of your employer: \_\_\_\_\_

Type of your job: \_\_\_\_\_  
 Postal Address of your employer: \_\_\_\_\_  
 Land Line number: \_\_\_\_\_ Mobile phone number: \_\_\_\_\_  
 Fax number: \_\_\_\_\_

4.3 Are you leaving your job to be a student? Yes  No

4.4 If you were employed by more than one employer before applying for this postgraduate study program, please list up to three of your most recent employers.

No	Type of Job	Employer	P.O.Box	Tel.	Town	Service Years From---to---
1.						
2.						
3.						

## 5. Field of training you are applying for

5.1 In which one of the following fields do you want to pursue your training? Mark 'X'

S/ No	Postgraduate Programs	Choice	Preferred Center for the study
1	Educational Leadership and Management (M.A.)		HU main campus <input type="checkbox"/>
2	Sociology (M.A.)		
3	Peace and Development Studies (M.A.)		Chiro <input type="checkbox"/>
4	Social Psychology (M.A.)		
5	Climate Change & Disaster Risk Management (M.A.)		Dire Dawa <input type="checkbox"/>
6	M.A. in Geography and Environmental Studies (Specialization in Environment & Land Resource Management; Specialization in Urban and Regional Development Planning)		Harar <input type="checkbox"/>
7	Afan Oromo Linguistics (M.A.)		Jigjiga <input type="checkbox"/>
8	Afan Oromo Literature (M.A.)		
9	Afan Oromo and Literature Teaching (M.A.)		
10	Gender & Development Studies (M.A.)		

**6. Financial Support**

Give the name and address of the sponsoring organization of your graduate study.

Name of the sponsoring organization: \_\_\_\_\_

Postal Address of your sponsor organization: \_\_\_\_\_

Land Line number: \_\_\_\_\_ Mobile phone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

**7. Statement by the student**

I hereby certify that all the information given in this application is complete, correct and accurate. I fully realize that the University is entitled to take any actions on me, including dismissal at any time, if the information given by me here is found to be incorrect and misleading. I also realize that I will not be entitled to any reimbursement whatever fee I might have paid in cases where the University takes action on me as a result of any mischievous information I might have given.

I shall also take full responsibility for reading and abiding by the rules and regulations included in the University Student Handbook deposited in the University Library System.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Place/Center: \_\_\_\_\_

**HARAMAYA UNIVERSITY**  
**Postgraduate Program Directorate**  
**Non-regular Postgraduate Program-CEP**

**LETTER OF COMMITMENT & SPONSORSHIP OF THE EMPLOYER ORGANIZATION**  
**(To be filled out and signed by the Head of the Organization)**

The School of Graduate Studies (SGS) of Haramaya University appreciates your assistance in filling out this form and sending it to the address below.

HARAMAYA UNIVERSITY  
POSTGRADUATE PROGRAM DIRECTORATE  
P.O.BOX 138, Dire Dawa, ETHIOPIA

On behalf of the candidate, namely \_\_\_\_\_,  
the organization of which I am head is committed to grant financial support covering the living expenses, tuition fee for course works, thesis research budget and employment in the course of his/her postgraduate training. The financial support is intended to last until the completion of the program of study. Moreover, I express the organization's agreement to refrain from any obligatory assignments of the candidate which may jeopardize his/her program of study.

Also, I am cognizant of the fact that the concrete realities of the country dictate that education in general, and postgraduate studies in particular, must be geared towards the solution of specific problems affecting the country. I am, therefore, aware of the fact that this specific training my organization is fully sponsoring must be geared towards fulfilling a definite national purpose. Accordingly, my organization is committed to maintain the monthly salary, pay the tuition fee and thesis research budget and an appropriate position of employment after the abovementioned candidate completes his/her postgraduate studies.

Total amount of fees (tuition for main course, **30** credit hours; supervision and thesis examiners)

**1. Birr: 27, 450.00** (twenty seven thousand four hundred fifty) at **HU main campus, Harar & Dire Dawa Centers.**

**2. Birr 32,100.00** (thirty two thousand one hundred) at **Chiro and Jigjiga Centers.** This cost does not include fees for remedial courses, extra course taken beyond 30 credit hours and research expenses.

**Payment installment per term:** Birr 550/700 x credit hours to be taken at each **Term** x 10% service charge

**Final installment:** Birr 9,000.00 (nine thousand Birr) for thesis supervision and examination

**Notice: Payment should be effective before registration of the course in each term**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Position \_\_\_\_\_

Organization \_\_\_\_\_ Date: \_\_\_\_\_

P.O. Box \_\_\_\_\_ Town/City \_\_\_\_\_

Country \_\_\_\_\_

Fax: \_\_\_\_\_ Tel. \_\_\_\_\_ Mobile: \_\_\_\_\_

\_\_\_\_\_ e-mail \_\_\_\_\_

**Please put the official seal**