



OFFICE OF THE ACADEMIC REGISTRAR

**APPLICATION FOR ADMISSION TO BUSITEMA UNIVERSITY UNDER THE
GOVERNMENT SPONSORSHIP SCHEME, 2020/2021 ACADEMIC YEAR**

TO BE COMPLETED BY DIPLOMA AND CERTIFICATE HOLDERS ONLY

NOTE: This form must be submitted with original receipt showing payment of Application fee, a printout of a fully filled online application form and all your academic documents.

PART I

**ALL NAMES MUST BE WRITTEN IN FULL (NO INITIALS) AS THEY APPEAR ON THE
ACADEMIC DOCUMENTS AND THE FORM MUST BE FILLED IN CAPITAL LETTERS**

1. (a) Surname
(b) Other names (in full).....
(c) Sex..... (d) Date of Birth: DD..... MM..... YY.....
(You must attach a copy of your birth certificate)
(e) Nationality..... Home District.....
(f) National Identity Card Number (NIN)

(You must attach a copy of your national identity card)

2. (a) Seeking admission through: (i) Diploma Holders ☐ (ii) Certificate Entry ☐
(b) Program applied for (Use the three letter codes provided for in the announcement)
CHOICE (only one program is required)

3. (a) Qualifications (Certificate or Diploma details)

YEAR		NAME OF INSTITUTION	QUALIFICATION ATTAINED	CLASS OF AWARD (IF ANY)
From	To			

Attach certified copies of certificates and academic transcripts of qualification(s) from the awarding Institutions.

- (b) UACE or its Equivalent

Year of Examination..... Index No.....

Please indicate the subjects and grades where applicable.

SUBJECT					
GRADE					

Attach a photocopy of the UACE certificate or its equivalent.

(c) UCE or its Equivalent

Year of Examination:_____ Index No_____

SUBJECT					
GRADE					

SUBJECT					
GRADE					

Summary of Grades	
Distinctions	
Credits	
Passes	

Attach a photocopy of the UCE Slip or certificate

4. Are you already admitted to any University? Yes ☐ No ☐

If answer is **Yes**, give details:

(i) Name of the University.....

(ii) Registration No.....

(iii) Program admitted to.....

(iv) Sponsor.....

PART II

5. Other personal information:

(a) Marital Status.....

(b) Contact Address.....Tel.....

(c) Permanent Address.....

(d) Emergency contact address:..... Tel.....

Fax..... E-mail.....

(e) Religious affiliation (if any).....

6. (a) Home County..... (b) Sub. County (LC.III).....

(c) Parish (LC.II)..... (e) Village (LC.1).....

7. Information on Parents (Even if Deceased)

	Father	Mother
Surname:		
Other names:		
Nationality:		
Date of Birth:		
Village of Birth:		
Sub. County:		
District of Birth:		
Country of Residence:		
Address:		
Telephone:		

8. Information on Guardian (where applicable):

Name:..... Occupation.....

Address..... Telephone No.....

9. Position of responsibility held while at School/College:

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10. Employment Record

Employer	Post (s) Held	Dates

11. Give 2 names of referees from whom confidential information may be obtained about you if necessary.

(1) Name:..... Address.....
Tel.....

(2) Name..... Address.....
Tel.....

It should be noted that cases of impersonation, falsification of documents or giving false or incomplete information whenever discovered either at registration or afterwards will lead to automatic cancellation of admission and prosecution in the Uganda's courts of Law.

12. Declaration by the Applicant: I have noted and understood the implication of giving incomplete/incorrect information. I hereby certify that to the best of my knowledge and belief, the particulars given in this form are true and complete in all respect.

Signature of Applicant..... Date.....

PART III

13. Confirmation from the local councils (LCs) of applicant's home district and citizenship.

NOTE: Local Council officials are warned against recommending candidates who are Non-Ugandans for government sponsorship and recommending candidates who do not originate from the district.

I confirm that to the best of my knowledge the information provided above by the applicant about his or her names, parents, home district and citizenship is true and the applicant is a Ugandan citizen.

Name.....

(LC I)

Signature.....

Date and Stamp.....

Name.....

(LC III)

Signature.....

Date and Stamp