

Africa Institute for Strategic Resource Services and Development

Healthier & Wealthier Communities through Academic-Community-Public-Private-Partnerships

PASSPORT SIZE PHOTOGRAPH

APPLICATION FORM FOR ACADEMIC YEAR 2018/2019

RIGHT HAND THUMBPRINT

Note: This form must be submitted with evidence of payment of the Application fee

PART 1

To be completed in CAPITALS by the Application.

ALL NAMES MUST BE WRITTEN IN FULL AS ON 'O' LEVEL OR ANY OTHER ACADEMIC DOCUMENT

1. (a) Sur	name (in full)						
(b) Othe	er names (in full)						
(c) Gend	der: (Tick), Male Female						
(d) Date	e of Birth (DDMMYY) (e) Citizenship						
(You m	nust attach a copy of birth certificate)						
(f) Hom	(f) Home District						
2.	Programme applied for- (tick only one level of Programme)						

	Program Specialization	Artisan	Certificate	Diploma
1)	Laboratory Science Education and Industry			
2)	Poultry Industry and Business			
3)	Pig Industry and Business			

	Diary Industry and Business							
4)	Diary industry and business							
5)	Meat Industry and Business							
6)	Leather Industry and Business							
7)	Bee Industry and Business							
8)	Feed Industry and Business							
9)	Fish Industry and Business							
10)	Wildlife Industry and Business							
11)	Dip. in Livestock Product Dev. & Ent.	Dip. in Livestock Product Dev. & Ent.						
	Uganda Certificate of Education (UCE) or ination	its equiva	lent. Inde	x No			Year of	
		its equiva	lent. Inde	x No			Year of	

Distinctions	Credits	Passes

Attach a photocopy of the UACE Certificate of Education or its equivalent.

Subject			
Grade			

Attach a photocopy of the UACE Certificate or its equivalent (Strictly a photocopy of the Certificate or Result slip must be attached)

Other qualifications and Institutions attended, if a	5.	Other	qualifications and	Institutions	attended, if a	١y
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Year		Name of Institution	Qualification Obtained	Class of Award
From	То			(if any)

	_	piploma Holders should attach certified c s from the awarding institutions.	opies of their Certi	ficates and Academic			
6.	6. If you are already admitted to the University indicate:						
	(i)	Registration Number					
	(ii)	Programme					
	(iii)	Sponsor					
		PA	ART II				
7.	Other	Personal Information					
	(a) Ma	arital Status (married, single, other spec	:ify)				
	(b) Pe	ermanent Address					
	(c) Em	nergency contact Address, if different fro	m (b) above				
	(d) Te	lephone No(e) Fax	(No	(f) E-Mail			
	(g) Re	ligious affiliation (if any)					
8.	(a) Ho	me Country(b) Sub-county (LCI	1)			
	(c) Par	rish (LCII) (c	d) Village (LCI)				
9.	Inform	nation on Parents:					
		<u>Father</u>		<u>Mother</u>			
	Surnar	ne					
	Other	Names					
	Date o	f Birth					
	Village	e of Birth					
	Sub-Co	ounty					
	Distric	t of Birth					

	,		
Cour	ntry of Residence		
Addı	ress		
Tele	phone Number		
10. Info	rmation on Guardian (wh	ere applicable)	
(n)	Guardian`s name	(o) Guardi	an`s occupation
(p)	Guardian's address	(q) Tel. Nur	nber
11. Pos	itions of responsibilities I	neld while at School/College	
12. Em _l	ployment Record:		
Giv	e brief details of employr	ment record. You may use a separa	te sheet of paper.
	/FR	POST(S) HELD	DATE(S)
EMPLOY	LIV.	I OSI(S/ IILLD	DAIL(3)
EMPLOY	LIX	T OST(S) TIELD	DATE(3)
EMPLOY	LN	1 031(3) 11223	DATE(S)
EMPLOY	<u> </u>		DATE(S)
EMPLOY			
13. Give	e 2 names of persons in red about you if necessary.	esponsible position from whom co	nfidential information may b
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givir	ng False/incomplete info	all applicants that cases of impersonation, rmation wherever discovered either at Re of Admission and Prosecution in the Uga	egistration or afterwards will lead
15.	Declaration by the appl	icant:	
note		mation given on this form, to the best of application of giving incorrect information.	-
9	Signature of the Applicar	nt	Date
	[Thank You for Downloading this online f	form