THE REPUBLIC OF UGANDA MINISTRY OF EDUCATION AND SPORTS PUBLIC UNIVERSITIES JOINT ADMISSIONS BOARD - PUJAB

Current Right
Passport hand
Photograph Thumb Print

AC					/2009							
NC	OTE: (i) This form muc	t be submitted v	with evidence o	f payment of	application fee.							
	* /	st be completed overnment Spo	•	tes who seek	admission to the Public	Universities through	Direct Entry					
	(iii) Names to be used should be similar to those on PLE and 'O' level Documents											
	PART I											
	To be Completed in CAPITALS by the applicant											
	ALL NAMES MUST BE WRITTEN IN FULL (NO INITIALS)											
1 (a)	a) Surname (in full)(b) Other Names (in full)											
(c)	Year of A' Level Examination											
(d)	I) Male Female A' Level Index Number											
(e)	e) Date of Birth (DDMM											
	(You must attach a copy of the birth certificate)											
(g)	Home District											
2 (a)) PROGRAMMES APPLIED FOR											
	Choices of Programmes at the Universities - (use the three letter codes provided for each Programme)											
(i)	Choices for National M	Merit Admissio	n				_					
	1ST	2ND	3RD	4TH	5TH	6TH						
		•										
(ii)	Choices for District Q											
	1ST	2ND	3RD	4TH								
(b)		i ' '	,		ll codes provided at appe	endices A & B)						
	1ST	2ND	3RD	4TH								
(c)	Choices of programme and Sports)	es at other Terti	ary Institutions	- up to 4 choi	ces (use codes provided l	by the Ministry of Ed	lucation					
	1ST	2ND	3RD	4TH								

	SUBJECT						SUMMARY OF C	RADE	
	,						Distinctic Credits		
	GRADE								
1	Uganda Adva	nced Certificate	of Education ((UACE) or its ed	ducation or its equivalent. Index	•	Year of Examination		
	Please indicat	e the subjects an			4	-			
	SUBJECT	1	2	3	4	5			
	GRADE								
		py of the UACE Ce	rtificate or its eq	uivalent (Strictly a	photocopy of the C	ertificate or Result	slip must be attached where appl	icable)	
			•		,			,	
5	Institutions at		NAME OF	Thiories into	OHALIFIO	ATTOM OPTAIN	TEL CRADE (TEANN)	_	
	FROM	ТО	NAME OF	INSTITUTION	QUALIFIC	ATION OBTAIN	NEI GRADE (IF ANY)	_	
		1						=	
5	If you are alre	ady admitted to	the University	v indicate:				_	
	(i) Registration Number								
	() 0				` '				
	(111) Programn	1e			(iv) Sponsor			•••••	
7	Other Persona	1 Information		PART II					
. ,		, ,	•						
(b)									
(c)	Emergency contact Address, if different from (b) above								
	Telephone No)		(e) Fax n	o (f) E-mail			
(d)	Religious affi	liation (if any)							
٠,									
(g)	Home Court				(b) Cub sour-t-	(I CIII)			

9	Information on Parents	
	Father	Mother
	Surname	
	Other Names	
	Citizenship	
	Date of Birth	
	Village of Birth	
	Sub-County	
	Nationality	
	Country of Residence	
	Address	
	Telephone Number	
10	Information on Guardian (where applicable)	
	Guardian's nameGuardian's o	occupation
	Guardian's address Telephone N	lumber
11	Responsibilities held while at School/College	

12 Employment Record

Give brief detail of employment record. You may use a separate sheet of paper.

EMPLOYER POST(S) HELD DATE(S)

13	Give names of 2 persons in responsib	le positions from whom conf	idential information may	be obtained about you if necessary				
(i)	Name	Address						
	Telephone Number							
(ii)	Name	Address						
	Telephone Number							

14	Declaration by the applicant. I have noted and understood the implication of giving incomplete/incorrect information. I confirm that the information given on this form ,to the best of my knowledge, is correct.								
15	15 It should be NOTED by all applicants that cases of Impersonation, Falsification of Documents or providing False/Incomplete Information whenever discovered either at Registration or afterwards will lead to automatic CANCELLATION of Admission and prosecution in the Uganda courts of Law.								
	Signature of th	ne applicant			Date				
16	PART III 16 Confirmation from the Local Councils (LCs) of applicant's home district 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/her names, parents, home district and citizenship is true and the applicant is a Ugandan Citizen.								
Name									
	Signature	(LC I)			Signature(LC II)				
	Date and Stam	ıp			Date and S	Stamp			
17		Date and Stamp							
17 Headteacher's Endorsement. Rate the candidates's health, general conduct, relationship of staff/students, attitude to work etc									
	Rute the cultur	Excellent	Good	Average	Poor	Bad	Comment(s)	٦	
	Health						()	7	
	Games								
	Conduct								
	Attitude to wo	rk							
18	Information on Disability								
a)	Disabled: Yes/	,							
b)	Nature of disa	bility							
c)	Level of Disab	ility							
d)	Headteacher's	Comment							
,									
		• • • • • • • • • • • • • • • • • • • •		•••••	• • • • • • • • • • • • • • • • • • • •				
19	Name of Head	teacher			Signature				
	Date				School Sta	mp			
NB:Candidates who obtained overall result/Grade 7,9,Y or Z at O'level do not qualify for University admission and									

should not apply.