

P. O. Box 317, Kabale- Uganda Emails: info@kab.ac.ug registrar@kab.ac.ug admissions@kab.ac.ug



UNIVERSITY Tel: 256-392-848355/4864-26463 Mob: 256-782-860259 Fax: 256-4864-22803 Website: www.kab.ac.ug

Affix a photograph of

OFFICE OF THE ACADEMIC REGISTRAR

UNDERGRADUATE PROGRAMMES

APPLICATION FOR ADMISSION TO THE UNIVERSITY
UNDER GOVERNMENT SPONSORSHIP (DIPLOMA ENTRY)

Α.	PERSONAL INFORMATION	current likeness			
1.	a) Surname/Last Name (Block Letters):	Write your			
	b) Other Names (in full):	name(s) on the			
	(Names should be those that appear on all your academic papers)	reverse side			
3.	Sex: Male Female				
4.	a) Marital Status: b) No. of Children: c) Religio	on:			
5.	a) Date of Birth: b) Place of Birth:				
6.	a) Home District: b) Citizenship/Nationality:				
	c) Country of Residence:				
7.	Permanent address:				
	(Postal Address or Home Village, Sub-county, County,	District & Country)			
	Tel. No.: E-mail:				
8.	Contact Address (if different from 7 above):				
9.	How did you know about Kabale University? (tick the right choice(s)) Throug	jh:			
	Radio 🗌 Newspaper 🗌 Staff 🔄 Website 🗌 Liaison office 🗌 Student 📃				
	Other, specify (<i>name of person, office or avenue</i>):				
В.					
10	10. Course/Academic Programme applied for in letter codes shown on the noticeboard				
	1 st Choice:	oice:			
11	11. Academic Year: E.G.: (2018/2019)				

12. Proposed subject combination (For only Education)

institution(s).

NB: (i) Only possible subject combinations should be indicated.
(ii) Diploma holder applicants must attach copies of the relevant Diploma/Transcript(s) certified by the awarding

	2 nd Choice set of 2
subjects	subjects
1	1
2	2

13. Results: Uganda Certificate of Education or its Equivalent

Index number	Year of examination	No. of Distinctions	No. of Credits	No. of Passes

(Attach a copy of the Uganda Certificate of Education, or its equivalent, where applicable)

14. Results: Uganda Advanced Certificate of Education, or its Equivalent

Subject	Grade	Subject	Grade

(Attach a Photocopy of the Uganda Advanced Certificate of Education, or its equivalent)

15. Institutions attended after Secondary School (WHERE APPLICABLE - attach an extra page if necessary

Name of Institution	Enrolment Date	Qualification/Award	Completion Date

Attach certified photocopies of the Certificates and Transcripts for Post A-Level Qualifications.

16. Responsibilities held while at school:

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17. Employment Record (WHERE APPLICABLE - attach an additional page if necessary)

Employer	Post/Title Held	Duration
		to
		to
		to

18. If you are already admitted to the University, indicate:

- a. Registration number:
- **b.** Programme/course:
- c. Sponsor:

INFORMATION PARENTS/GUARDIANS

19. Information on parents

	Father	Mother
Surname		
Other name(s)		
Citizenship		
Date of Birth		
Village of Birth		
Sub-county		
District		
Nationality		
Country of Residence		
Occupation		
Postal Address		
Telephone contact		

20. Information on guardian (where applicable)

Name:	Occupation:
Postal/Physical Address:	Telephone contact:

21. Give names of two (2) responsible persons from whom confidential information may be obtained about you if need arises

a.	Name:	b. Name:
	Telephone contact:	Telephone Contact:
	Address:	Address:

C. DECLARATIONS:

22. Please note that cases of impersonation, falsification of documents or giving false/incomplete information, whenever discovered either in the course of registration or afterwards, will lead to automatic CANCELLATION of admission or withdrawal of conferred qualification and prosecution in the Courts of Law.

23. Declaration

I certify that I have read and understood the conditions for admission to the University and that to the best of my knowledge the information given above is true.

SIGNATURE OF APPLICANT DATE:

University fees are deposited with either STANBIC BANK or EQUITY BANK (Kabale University Accounts)

• STANBIC Account Details: A|C Number: 9030005669277; A|C Type: Current; Stanbic Bank Kabale Branch

• DFCU Account Details: A|C Number: 1011011020000433; A|C Type: Current; Kabale Branch

ONLY <u>Development Fund</u> is deposited with CENTENARY BANK: *Kabale Branch*; *A*|*C Number*: **7010400026**; *A*|*C Type*: Current

Contribution to NCHE should be deposited with the NCHE Stanbic Bank Account:

• Name: Students' Collection; A\C Number: 9030005961997; Kyambogo Branch