GRADUATE
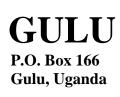
GULU UNIVERSITY

P.O. Box 166
Gulu, Uganda

Tel: +256-471-433573
Email: ar@gu.ac.ug
URL: www.gu.ac.ug

Recent applicants' passport size photograph

OFFICE OF THE ACADEMIC REGISTRAR

APPLICATION FORM FOR ADMISSION TO MASTER DEGREE AND POSTGRADUATE DIPLOMA PROGRAMMES

PRIVATE SPONSORSHIP

1. Indicate the Programme of your choice: Use the **3-letter Code** for the programmes shown in the advertisement.

Programme Code

2. a) Surname (Block letters) ………………………………………………………………………

   b) Other Names (in full) ………………………………………………………………………

3. Sex [ ] Female [ ] Male. Date of birth [DD/MM/YYYY]: ……/……/…….

4. Home District: ………………… Sub-county: ……………………… Village: ……………….

5. Citizenship: …………………………… Country of Residence: ……………………………

   Religious Affiliation: ……………………………………………………………………...

6. Permanent Address: ……………………………………………………………………….

7. Telephone Number(s): …………….... ………………………………………………………

8. Degree(s) Obtained:

Institution Attended	Qualification Obtained	Year Obtained
…………………………………………	…………………………..	…………………
…………………………………………	…………………………..	…………………

9. Postgraduate Diploma(s) Obtained (where applicable)

Institution Attended	Qualification Obtained	Year Obtained
…………………………………………	…………………………..	…………………
…………………………………………	…………………………..	…………………

10. Ordinary Diploma(s) Obtained (where applicable):

Institution Attended	Qualification Obtained	Year Obtained
…………………………………………	……………………………..	…………………
…………………………………………	……………………………..	…………………

11. Uganda Advanced Certificate of Education (U.A.C.E) or its Equivalent:

    a) Name of School ……………………………………………………………………

    b) Index Number ……………………………………………………………………

    c) Year of Examination ……………………………………………………………………

    General Paper   ……………………………………………

……………………………………………   ……………………………………………

……………………………………………   ……………………………………………

……………………………………………   ……………………………………………

……………………………………………   ……………………………………………

PLEASE ATTACH A PHOTOCOPY OF THE UGANDA ADVANCED CERTIFICATE OF EDUCATION OR ITS EQUIVALENT. (STRICTLY A COPY OF ACADEMIC DOCUMENTS)

12. Uganda Certificate of Education (U.C.E) or its Equivalent:

    a) Name of School   ……………………………………………………………

    b) Index Number   ……………………………………………………………

    c) Year of Examination   ……………………………………………………………

PLEASE ATTACH A PHOTOCOPY OF YOUR U.C.E. CERTIFICATE OR ITS EQUIVALENT. (STRICTLY A COPY OF ACADEMIC DOCUMENTS)

13. Diploma, Certificate or its Equivalent:

Institution Attended	Qualification Attained	Yr of Qualification
…………………………………	…………………………………	…………………
…………………………………	…………………………………	…………………

PLEASE ATTACH A PHOTOCOPY OF EACH OF THE CERTIFICATES, DIPLOMAS OR EQUIVALENT. (STRICTLY A COPY OF ACADEMIC DOCUMENTS)

14. Declaration:

I declare that the information given on this form is correct and accurate.

Signature of the Applicant ………………………………..   Date …………………

Note:
1. *Please attach copies of academic documents*
2. *Ensure that you photocopy Page 1 of this Application Form, with your photo attached, which must be produced by successful candidates before receiving Admission Letter.*