

# APPLICATION FOR ADMISSION TO UNDERGRADUATE COURSES



Uganda Martyrs  
University

It is essential that you complete all relevant sections of this form. This will ensure efficient processing of your application. Complete the form in **BLUE** or **BLACK** ink. Please use **CAPITAL** Letters.

Received: \_\_\_\_\_

## 1. PERSONAL DETAILS

**Surname/Family name:** \_\_\_\_\_  
(as on birth certificate/passport)

**First/Given names:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Sex:** Male  Female   
(Mr/Mrs/Miss/Ms/Dr/Rev)

**Date of Birth:** \_\_\_\_\_  
(DD-MMM-YYYY)

**Country of Birth:** \_\_\_\_\_

**Country of Residence:** \_\_\_\_\_

**Nationality:** \_\_\_\_\_



## 2. ADDRESS

### Home (Permanent) Address

Postal Address: \_\_\_\_\_  
(street address or post box)

City/Town: \_\_\_\_\_

Postcode: \_\_\_\_\_  
(where available)

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### Correspondence Address (if different from Home Address)

Postal Address: \_\_\_\_\_  
(street address or post box)

City/Town: \_\_\_\_\_

Postcode: \_\_\_\_\_  
(where available)

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

This completed form and all supporting documents should reach the university no later than **May 30th** of the year you are seeking admission, and should be sent to:

**Undergraduate Applications, The Registrar, Uganda Martyrs University, P.O. Box 5498, KAMPALA, Uganda**

or to the Uganda Martyrs University Kampala Office at the **Uganda Catholic Social Training Centre, Rubaga**

Further information is available at [www.fiuc.org/umu/](http://www.fiuc.org/umu/)

### FOR REGISTRY USE ONLY

Faculty Decision		
Application Number		
Course		

### 3. PREVIOUS EDUCATION

#### 3.1 SECONDARY SCHOOL LEAVING EXAMINATION

UGANDA ADVANCED CERTIFICATE OF EDUCATION (UACE) OR EQUIVALENT.

Certified photocopies of results and certificates must be attached to this application form.

Examining Authority: .....

Name and address of School: .....

Year of Examination: ..... Index Number: .....

Subjects Indicate whether Principal (P) or Subsidiary (S)	Results/Grade						Overall Grade
	Papers						
	1	2	3	4	5	6	

#### 3.2 ORDINARY LEVEL EXAMINATION

UGANDA CERTIFICATE OF EDUCATION (UCE) OR EQUIVALENT.

Certified photocopies of results and certificates must be attached to this application form.

Examining Authority: .....

Name and address of School: .....

Year of Examination: ..... Index Number: .....

Subjects Provide Grade/Marks (not pass, credit, distinction) If a subject is not listed, include it in the spaces provided.					
Subject	Grade	Subject	Grade	Subject	Grade
ACCOUNTING		ENGLISH LITERATURE		MUSIC	
AGRICULTURE		FINE ART		PHYSICS	
BIOLOGY		FRENCH		RELIGIOUS EDUCATION	
CHEMISTRY		GEOGRAPHY		TECHNICAL DRAWING	
COMMERCE		HISTORY			
ENGLISH LANGUAGE		MATHEMATICS			

#### 3.3 ANY OTHER ACADEMIC QUALIFICATIONS

Certified photocopies of results and certificates must be attached to this application form.

University / Institute / College (include address and country)	Qualifications Obtained (if any)	Date Obtained	Full Time / Part Time / Distance



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## 6. ENGLISH LANGUAGE COMPETENCY

English is the language of instruction at Uganda Martyrs University. It is therefore imperative that all students have a good command of the English language. Students who do not have a good command of English may be required to undertake a remedial English course (given by the university every July) prior to enrolling in the university.

Please indicate your level of competency in English.

	Speaking	Reading	Writing
Fluent			
Adequate			
Basic			

Do you have any English Language Qualifications? Yes  No   
(such as TOEFL or a University degree in which instruction was in English)

If Yes, Which Qualification? .....

Date of Final Examination: .....

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## 7. EQUAL OPPORTUNITY

Please indicate any medical condition you may have that may require adjustments to be made to the curriculum or the teaching environment.

None  Unseen disability e.g. diabetes, epilepsy   
Dyslexia  Blind/partially sighted   
Deaf/hearing impaired:  Other   
Wheelchair user / mobility difficulties  .....

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## 8. REFERENCES

Please provide the name of one person who is aware of your academic or professional ability and can support your application by providing a reference. You must forward the attached Referee Form to your referee, who should fill it in and return it to you in a sealed envelope. Forms should be officially stamped. NOTE: Referees cannot be related to you in any way.

Name of Referee: .....

Address: .....

City/Town: .....

Postcode: .....

Country: .....

Telephone: .....

Cell phone: .....

E-mail: .....

Fax: .....

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## 8. DECLARATION

I confirm that the information given on this form is to the best of my knowledge true, correct and accurate.

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

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# COURSES AVAILABLE FOR THE 2010/2011 ACADEMIC YEAR



Uganda Martyrs  
University

Please indicate your course preference by placing a number in order of preference in the appropriate box. You may select up to three (3) courses. Complete the form in **BLUE** or **BLACK** ink.

Name:  
(Surname/Initials)

## FIRST BACHELORS DEGREES

**Bachelor of Business Administration and Management**

(B.BAM)

Three years full-time. (NKOZI)

**Bachelor of Business Administration and Management**

(B.BAM)

Three years part-time. (MASAKA)

**Bachelor of Arts (Ethics and Development Studies)**

(B.A.)

Three years full-time.

**Bachelor of Science (Economics, Mathematics, Statistics, Computer Science)**

(B.Sc.)

Three years full-time.

**Bachelor of Science (Information Technology)**

(BSc Information Technology)

Three years full-time.

**Bachelor of Science (Business Economics)**

(B.Sc.(Business Economics))

Three years full-time.

**Bachelor of Science (Financial Mathematics)**

(B.Sc.(Financial Mathematics))

Three years full-time.

**Bachelor of Science (Public Health and Health Promotion)**

(B.Sc.(Public Health & Health Promotion))

Three years full time.

**Bachelor of Environmental Studies**

(B.Envi.St.)

Three years full-time.

**Bachelor of Arts (Democracy and Development Studies)**

(B.A.)

Two years distance learning, after the completion of the Diploma (Democracy and Development Studies)

**Bachelor of Arts (Micro finance & Community Economic Development)**

(B.A.)

Two years distance learning, after the completion of the Diploma (Micro finance & Community Economic Development)

**Bachelor of Education (Primary)**

(B.Edu.(Primary))

Three years distance learning.

**Bachelor of Arts (Local Governance and Human Rights)**

(B.A.)

Two years distance learning, after the completion of the Diploma (Local Governance and Human Rights)

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# COURSES AVAILABLE FOR THE 2010/2011 ACADEMIC YEAR



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Please indicate your course preference by placing a number in order of preference in the appropriate box. You may select up to three (3) courses. Complete the form in **BLUE** or **BLACK** ink.

Name:  
(Surname/Initials)

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## FIRST BACHELORS DEGREES (cont.)

**Bachelor of Science (Agriculture)**

(B.Sc.(Agric.))

Four years distance learning.

**Bachelor of Science (Organic Agriculture)**

(B.Sc.(Organic Agric.))

Four years distance learning.

**Bachelor of Social Development and Counselling**

(B.Soc.Dev. & Coun.)

Three years part-time.

# COURSES AVAILABLE FOR THE 2010/2011 ACADEMIC YEAR



Uganda Martyrs  
University

Please indicate your course preference by placing a number in order of preference in the appropriate box. You may select up to three (3) courses. Complete the form in **BLUE** or **BLACK** ink.

Name:  
(Surname/Initials)

## DIPLOMA COURSES

### **Diploma (Computer Science)**

One year full-time. (NKOZI)

### **Diploma (Computer Science)**

Two years part-time. (MASAKA)

### **Diploma (Health Services Management)**

One year full-time.

### **Diploma (Health Promotion and Education)**

One year full-time.

### **Diploma (Democracy and Development Studies)**

Two years distance learning.

### **Diploma (Micro finance & Community Economic Development)**

Two years distance learning.

### **Diploma (Primary Education)**

Two years distance learning.

### **Diploma (Local Governance and Human Rights)**

Two years distance learning.

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# REFEREE REPORT FORM (Confidential)



Uganda Martyrs  
University

Please complete the form in **BLUE** or **BLACK** ink.

Received:

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## To: The Applicant

Please complete this section of the form, then pass it to the referee named on your application form, requesting that it be completed and returned to you in a sealed envelope.

**Applicants Name (Surname/Initials):** .....  
(as on birth certificate/passport)

**Course applied for:** .....  
(your first preference)

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## To: The Referee

I would be grateful if you would use this form to give, in the space below, your opinion about the applicant.

- (a) The length of time you have known the applicant
- (b) If the candidate is/was employed by your organisation, their duties and standard of work
- (c) If the candidate's first language is not English, whether you consider his/her command of English (written and spoken) adequate for the course applied for.
- (d) Any other information you think relevant and which you feel would assist us in making our decision would be most welcome.

Please return the form in a sealed envelope to the candidate. Use an additional sheet if necessary.

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Name: ..... Position: .....

Organisation: .....

Signature: ..... Date: .....

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