

Attach one recent coloured Passports photo

## MINISTRY OF EDUCATION AND SPORTS

## TVET APPLICATION FORM FOR DILOPMA ADMISSIONS 2023/24

## **SECTION A: INSTRUCTIONS**

- i. This form is intended for applicants wishing to pursue a National Diploma under the TVET system.
- ii. This form can be obtained from the website of the Ministry of Education and Sports www.education.ug.go, office of the District/Municipality/City Education Officer, Local Councils' Offices, TVET Institutions, and at the Ministry of Education and Sports Department of TVET Operations and Management, Legacy Towers Wing B, Floor 3.
- This form MUST be completed and returned to Uganda Technical College Bushenyi; P.O. Box 81 Bushenyi or send by email to <a href="mailto:admissions@utcbushenyi.ac.ug">admissions@utcbushenyi.ac.ug</a> or <a href="mailto:ar@utcbushenyi.ac.ug">ar@utcbushenyi.ac.ug</a> with scanned copies of academic documents.
- iv. Please you MUST attach;
  - Photocopies of certificates/result slips/transcripts and certified degree certificates for degree holders
  - A copy of a National Identity Card (for 18 years and above) or an Identification from the previous institutions (for below 18 years)
  - A Copy(ies) of appointment/ contract/recommendation of relevant work experience (if any) and
  - A Copy of the Birth Certificate
- v. Persons with disabilities, and those from vulnerable categories and at-risk population such as females, urban poor, fishing communities, and others are encouraged to apply.

## SECTION B: PARTICULARS OF APPLICANT (To be completed in capital letters by Applicant)

1.	1. Names		
	Surname Others names		••
2.	2. Nationality Date of Birth		
	Sex		
3.	3. Home District County		
	Sub-county		
	Religious Affiliation (Optional)		
4.	4. Physical Address:		
	Parish Village Telephone		
	Contact		
	Parent/Guardians Name		
	Telephone Contacts		
	Parent/Guardian NIN		
	SECTION C: EDUCATIONAL BACKGROUND (To be completed by Appli applicable)	cant wl	here
	a. PLE results		
	Name of School		
	Year of sitting		
	Index Number Total Aggregates		

S/N	Subjects	Grade		Subject	Grade
1.			4.		
2.			5.		
3.			6.		
b.	O' Level: UCE results	S			
1	Name of School				
Ţ	Year of sitting				
I	ndex Number			. Total Aggregates	
Ι	ndex Number			. Total Aggregates	
	ndex Number			. Total Aggregates	
Ι				. Total Aggregates	
I <b>in</b>	Division		S/N	. Total Aggregates  Subjects	
I <b>in</b>	Divisionthe details				Score
I <b>in</b>	Divisionthe details		S/N		
I <b>in</b>	Divisionthe details		S/N 7.		
I in	Divisionthe details		S/N 7. 8.		
I <b>in</b>	Divisionthe details		S/N 7. 8. 9.		
Ι	Divisionthe details		S/N 7. 8. 9.		

	Year of sitting  Course Name				
	Index Number		Gra	de	
ill in	the details				
S/N	Course Subjects	Scores	S/N	Course Subjects	Scores
1.			4.		
2.			5.		
3.			6.		
d.	Technical/Vocational In	stitutes: Nation	ı al Cer	tificate/Advanced Craft (	 Certificate
	Results				
ll in	Course Name  Index Number  the details		(	Grade	
S/N	Course Subjects	Scores	S/N	Course Subjects	Scores
l <b>.</b>			4.		
2.			5.		
3.			6.		
e.	A-Level: UACE Results				<u> </u>
	Name of School		•••••		

4	Subjects	Scores	S/N	Subjects	Scores
1.			4.		
2.			5.		
3.			6.		
<b>J.</b>			U.		
f.	Any other Qualification(s)	1			
ame	of Educational Institution/Un	niversity			
		•			
					•••••
ourse	e Name				
ear o	f sitting	Registrati	on Nu	mber	•••
<b>11</b>					
lass (	of Grade				
ill in	the details				
	Course unit/Subjects	Scores	S/N	Course unit/Subjects	
S/N					Scores
			4.		Scores
1.					Scores
S/N 1. 2.	<b>.</b>		4.		Scores
1.	<b>.</b>				Scores
1. 2.			5.		Scores
1. 2.			5.		Scores
1. 2. 3.	of Educational Institution/Ur	niversity	5.		Scores
1. 2. 3.		niversity	5.		Scores

S/N	Course unit/Subjects	Scores	S/N	Course unit/S	ubjects	Score
1.			6.			
2.			7.			
3.			8.			
4			9.			
5			10.			
ECT	 'ION D: RELEVANT WOR	 RK RECORD	(IF A	 A <b>NY</b> ) (Attach a s	separate sheet if	necessary
S/N	Organization/Employer/ Se Employment	elf	Po	ost Held	Period	
	nronic Disease/Disability (if					•

Class of Grade .....

6.	Choice of Course(s) (select from the attached list)
	First Choice.
	Second Choice
	Third Choice
b) :	Briefly explain the reason for choosing the Course(s) you have selected.
•••	
•••	
7.	Choices of TVET Institutions (select from the attached list)
	First Choice
	Second Choice.
	Third Choice
8.	Declaration
Ι_	declare that to the best of my knowledge
the	e information provided above is correct.
Sig	gnature: Date:
	ote: Falsification of information can lead to cancellation of the offer and prosecution in the urts of law.

**SECTION E: FOR OFFICIAL USE ONLY** 

The o	committee has vetted	d and recomme	nded that	the applicant:	
i.	Be admitted on: -	Government		Private	
	Course				
	Institution				
ii.	Not be admitted; re	easons			
	<b>Head of Selection</b>	Team		Signature and Date	
Other	Head of Selection Remarks:	Team		Signature and Date	
Other		Team		Signature and Date	
Other		Team			
Other		Team		Signature and Date	
Other		Team			
Other					